

Site/Room: _____

Month: _____ Year: _____

**Ohio Department of Education
Child and Adult Care Food Program
NEW MEAL PATTERN
Infant Menu Record for Infants 0 through 5 Months**

Infant's Full Name: _____

Infant's DOB: _____

Please record specific food items offered to infant each day
Note: Iron-fortified infant formula or breast milk are the only required food components for infants age 0 through five months of age
Other food items may be introduced to the infant as developmentally appropriate

Required Components	DATE	DATE	DATE	DATE	DATE
Breakfast 4 to 6 fluid ounces of IFIF or breast milk*					
A.M. Snack 4 to 6 fluid ounces of IFIF or breast milk*					
Lunch 4 to 6 fluid ounces of IFIF or breast milk*					
P.M. Snack 4 to 6 fluid ounces of IFIF or breast milk*					
Supper 4 to 6 fluid ounces of IFIF or breast milk*					

*IFIF: Iron-fortified Infant Formula. Use "BF" if mother breastfed infant onsite.
An Infant Food/Formula statement must be kept on file for each infant under 12 months of age if you are not providing all required meal components
An Infant Menu Record is required for all infants claimed
Note: Juice is not allowed for infants under age one

Ohio Department of Education
 Child and Adult Care Food
 Program
NEW MEAL PATTERN
 Infant Menu Record
 Infants 6 through 11 Months

Site/Room: _____

Infant's Full Name: _____

Month: _____ Year: _____

Infant DOB: _____

Please record specific food items offered to infant each day

Required Components	Date:	Date:	Date:	Date:	Date:
Breakfast 6-8 fluid ounces of IFIF* or breast milk** and as developmentally appropriate 0-4 Tbsp. iron-fortified dry infant cereal or meat, fish, poultry, whole eggs, or cooked dry beans or peas, or 0-2 ounces of cheese or 0-4 ounces of cottage cheese or 0-4 ounces yogurt or a combination and as developmentally appropriate 0-2 Tbsp. vegetable, fruit or a combination					
A.M. Snack 2-4 fluid ounces of IFIF* or breast milk** and as developmentally appropriate 0-1/2 bread slice; 0-2 cracker; 0-4 tbsp. infant cereal or ready to eat cereal and as developmentally appropriate 0-2 tbsp. vegetable, fruit or a combination					
Lunch 6-8 fluid ounces of IFIF* or breast milk** and as developmentally appropriate 0-4 Tbsp. Iron-fortified dry infant cereal or meat, fish, poultry, whole eggs, or cooked dry beans or peas, or 0-2 ounces of cheese or 0-4 ounces of cottage cheese, or 0-4 ounces yogurt or a combination and as developmentally appropriate 0-2 Tbsp. vegetable, fruit or a combination					
P.M. Snack 2-4 fluid ounces of IFIF* or breast milk** and as developmentally appropriate 0-1/2 bread slice; 0-2 cracker; 0-4 tbsp. infant cereal or ready to eat cereal and as developmentally appropriate 0-2 tbsp. vegetable, fruit or a combination					
Supper 6-8 fluid ounces of IFIF* or breast milk** and as developmentally appropriate 0-4 Tbsp. iron-fortified dry infant cereal or meat, fish, poultry, whole eggs, or cooked dry beans or peas, or 0-2 ounces of cheese or 0-4 ounces of cottage cheese, or 0-4 ounces yogurt or a combination and as developmentally appropriate 0-4 Tbsp. vegetable, fruit or a combination					

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 An Infant Menu Record is required for all infants claimed
 Note: Juice is not allowed for infants under age one