Oregon Department of Education 255 Capitol St. NE Salem, OR 97310-0203

CACFP Administrative Review Report In Compliance

Sponsor: Sheridan SD Agreement #: 3619001 Review Date: April 23, 2013

Exit Conference Date: April 23, 2013

Sponsor Staff Interviewed: Penny Elliott: Executive Secretary

Reviewers: Barbara Cracknell, ODE Child Nutrition Specialist

Test month/Year: January 2013

Oregon Department of Education Child Nutrition Programs (ODE CNP) appreciates the courtesy and cooperation shown to Barbara Cracknell during the Administrative Review of Sheridan SD's Child and Adult Care Food Program (CACFP) operation. ODE CNP commends you for serving nutritious meals in a healthy environment.

The Administrative Review was not intended to discover all possible program deficiencies and the omission of any such deficiencies from this report or future reports does not mean they are acceptable.

The ODE CNP reviewer evaluated Sheridan SD's administrative records for the month of January 2013. A meal service observation was conducted and site records were reviewed.

ODE found no areas out of compliance with Federal and/or State regulations and policies.

Program Strengths:

- Penny Elliott is very organized and shows great attention to detail. Your effort to maintain program integrity is greatly appreciated.
- Menus show a nice variety of offerings.
- This program offers an excellent program and safe environment to the children in the community.

ODE CNP appreciates Sheridan SD s partnership in assuring all Oregon children are well nourished, ready to learn, and able to make life-long healthy food choices.

If you have any questions concerning the review, technical assistance provided, or this letter, please contact me, at (503) 947-5911 or Lynne Reinoso, at (503) 947-5892.

Reviewer certifies that s/he has reviewed the contents of this <i>Administrative Review Report</i> with the Sponsor's representative at the exit conference.		
Signature of reviewer	ODE Child Nutrition Programs Specialist Title	4/23/2013 Date
Sponsor's representative certifies that s/he has had the opportunity to review the contents of the <i>Administrative Review Report</i> with the reviewer and has received a copy of the <i>Administrative Review Report</i> .		
Signature of sponsor representative	Food Service Coordinator Title	$\frac{\sqrt{23/13}}{\text{Date}}$