

Section 5. Nutrition

Contact Person for Menu: _____ **Name of School/Site:** _____

- Complete a separate 1-week menu **for each** nutrition program that you are applying for.
- Additional templates and the Nutrition Guideline are available on the Toronto Public Health website (www.toronto.ca/health/nutrition). Program menus should comply with the Nutrition Guideline.

Program type (Select one): ☐ Breakfast ☐ Morning Meal ☐ Snack AM ☐ Lunch ☐ Snack PM ☐ Dinner

Meal Breakfast, Morning Meal ("3-food group snack"), Lunch/Dinner

At least 3 servings:

- 1 serving from **Vegetables & Fruit** group
- 1 serving from **Milk & Alternatives** group
- 1 serving from **Grain Products** and/or **Meat & Alternatives** group

'Food Safety and Nutrition workshop' for volunteer SNP coordinators and other volunteers: Do you have at least 1 person on site who has attended this free workshop in the last 2 years? ☐ Yes ☐ No

Snack (morning or afternoon Snack)

At least 2 servings:

- 1 serving from **Vegetables and Fruit** group
- 1 serving from **Milk & Alternatives** and/or **Grain Products** and/or **Meat & Alternatives**

Program menu:

Monday		Tuesday		Wednesday		Thursday		Friday	
Food	Serving size	Food	Serving size	Food	Serving size	Food	Serving size	Food	Serving size