# **Virginia Department of Education, Office of School Nutrition Programs Logo**

# **Summer Food Service Program Seven-Day Menu**

## Breakfast Menu

**Institution Name:** Click or tap here to enter text.

**Month/Year:** Click or tap here to enter text.

| **Meal Component** | **Monday**  Click or tap here to enter text. | **Tuesday**  Click or tap here to enter text. | **Wednesday**  Click or tap here to enter text. | **Thursday**  Click or tap here to enter text. | **Friday**  Click or tap here to enter text. |
| --- | --- | --- | --- | --- | --- |
| Milk | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Fruits/Vegetables | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Grains | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Optional Meat/Meat Alternate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

# **Virginia Department of Education, Office of School Nutrition Programs Logo**

# **Summer Food Service Program Seven-Day Menu**

## LUNCH Menu

**Institution Name:** Click or tap here to enter text.

**Month/Year:** Click or tap here to enter text.

| **Meal Component** | **Monday**  Click or tap here to enter text. | **Tuesday**  Click or tap here to enter text. | **Wednesday**  Click or tap here to enter text. | **Thursday**  Click or tap here to enter text. | **Friday**  Click or tap here to enter text. |
| --- | --- | --- | --- | --- | --- |
| Milk | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Fruits/Vegetables | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Grains | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Meat/Meat Alternate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

# **Virginia Department of Education, Office of School Nutrition Programs Logo**

# **Summer Food Service Program Seven-Day Menu**

## SUPPER Menu

**Institution Name:** Click or tap here to enter text.

**Month/Year:** Click or tap here to enter text.

| **Meal Component** | **Monday**  Click or tap here to enter text. | **Tuesday**  Click or tap here to enter text. | **Wednesday**  Click or tap here to enter text. | **Thursday**  Click or tap here to enter text. | **Friday**  Click or tap here to enter text. |
| --- | --- | --- | --- | --- | --- |
| Milk | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Fruits/Vegetables | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Grains | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Meat/Meat Alternate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

# **Virginia Department of Education, Office of School Nutrition Programs Logo**

# **Summer Food Service Program Seven-Day Menu**

## SNACK Menu

*Serve at least two meal components for snack.*

**Institution Name:** Click or tap here to enter text.

**Month/Year:** Click or tap here to enter text.

| **Meal Component** | **Monday**  Click or tap here to enter text. | **Tuesday**  Click or tap here to enter text. | **Wednesday**  Click or tap here to enter text. | **Thursday**  Click or tap here to enter text. | **Friday**  Click or tap here to enter text. |
| --- | --- | --- | --- | --- | --- |
| Milk | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Fruits/Vegetables | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Grains | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Meat/Meat Alternate | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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# **Summer Food Service Program Meal Pattern Guidelines and Serving Sizes**

## Meal Component: Milk

| **Food Item** | **Breakfast** | **Lunch/Supper** | **Snack** |
| --- | --- | --- | --- |
| Whole, low-fat, or fat-free fluid milk | 1 cup | 1 cup | 1 cup |

## Meal Component: Fruits/Vegetables

| **Food Item** | **Breakfast** | **Lunch/Supper** | **Snack** |
| --- | --- | --- | --- |
| Vegetables, fruits, or combination | ½ cup | ¾ cup[[1]](#footnote-1) | ¾ cup |
| 100% Juice[[2]](#footnote-2) | ½ cup | ¾ cup[[3]](#footnote-3) | ¾ cup[[4]](#footnote-4) |

## Meal Component: Grains

| **Food Item** | **Breakfast** | **Lunch/Supper** | **Snack** |
| --- | --- | --- | --- |
| Bread[[5]](#footnote-5) | 1 slice | 1 slice | 1 slice |
| Cornbread, biscuits, rolls, muffins, etc. | 1 serving[[6]](#footnote-6) | 1 serving | 1 serving |
| Cold dry cereal | ¾ cup or 1 oz. | --- | ¾ cup or 1 oz. |
| Cooked cereal or cereal grains | ½ cup | ½ cup | ½ cup |
| Cooked pasta | ½ cup | ½ cup | ½ cup |

## Meal Component: Meat/Meat Alternates

| **Food Item** | **Breakfast** | **Lunch/Supper** | **Snack** |
| --- | --- | --- | --- |
| Lean meat, poultry, or fish[[7]](#footnote-7) | 1 oz. | 2 oz. | 1 oz. |
| Alternate protein products | 1 oz. | 2 oz. | 1 oz. |
| Cheese | 1 oz. | 2 oz. | 1 oz. |
| Egg | ½ egg | 1 egg | ½ egg |
| Cooked dry beans/peas | ¼ cup | ½ cup | ¼ cup |
| Nut butter | 2 Tbsp. | 4 Tbsp. | 2 Tbsp. |
| Nuts or seeds[[8]](#footnote-8) | --- | 1 oz. | 1 oz. |
| Yogurt[[9]](#footnote-9) | 4 oz. | 8 oz. | 4 oz. |

1. For lunch and supper, required to serve two or more servings of vegetables, fruits, and/or full-strength juice totaling ¾ cup. [↑](#footnote-ref-1)
2. Juice must be pasteurized, full-strength (100%) juice. [↑](#footnote-ref-2)
3. Full strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement. [↑](#footnote-ref-3)
4. Juice may not be served at snack if fluid milk is the only other component served. [↑](#footnote-ref-4)
5. Breads and grains must be made from whole-grain or enriched meal or flour. Cereal must be whole-grain or enriched or fortified. [↑](#footnote-ref-5)
6. To determine serving sizes for grain products, use Exhibit A from Appendix E in the USDA Food Buying Guide for Child Nutrition Programs. [↑](#footnote-ref-6)
7. A serving consists of the edible portion of cooked lean meat or poultry or fish. [↑](#footnote-ref-7)
8. Nuts and seeds may meet only one-half of the total meat/meat alternate serving and must be combined with another meat/meat alternate to fulfill the lunch or supper requirement. [↑](#footnote-ref-8)
9. Yogurt may be plain or flavored, unsweetened or sweetened. [↑](#footnote-ref-9)