

Nebraska Child & Adult Care Food Program



The Infant Formula Selection & Solid Foods Form is intended to be a living document shared between the child care provider and families to ensure that formula/solid baby foods (texture appropriate) are served at the discretion of the parents. As new foods are introduced at home, the form must be updated. This allows the child care providers to know when and what solid foods should be served.

Infant Name:	Date of Birth:
A. Infant Formula Selection: This center provides	(brand) iron fortified infant formula to all infants under one year of age.
I ACCEPT or DECLINE (Please circle one) the center's formula. If	f declined, please identify what will be provided BREASTMILK (circle) or
FORMULA (list brand)	
Approximate Feeding Times:	Approximate Quantity (Ounces):

Parent Signature:

Date:\_

B. **Infant Solids Permission:** My infant is ready for solid foods to be served, in addition to formula or breast milk, according to the CACFP Infant Meal Pattern. Please insert date (month/yr) each food may be served and check all meals those foods may be served:

Food	Date	Meals			Food	Date	Meals		Food	Date		
	(Month/Yr)	(Please check)			(Month/Yr)	(Please check)			(Month/Yr)			
Iron-Fortified Infant		BK	LU/SU	SN	Fruit/Vegetables		BK	LU/SU	SN	Ready-to-eat Breakfas	t Cereal	
Cereals										(SNACK ONLY)		
						1						
Rice					Applesauce					Cereal:		
Oat					Apricots					Cereal:		
Barley					Avocados					Cereal:		
Mixed					Bananas					Grains (SNACK ONLY)		
Wheat					Carrots					Bread/Rolls		
Meat & Meat Alternatives				Corn					Biscuits			
Beef					Green Beans					Saltine Crackers		
Dry Beans					Mango					Pancakes		
Cheese, Natural					Melon					Waffles		
Chicken					Peaches					Tortillas soft		
Cottage Cheese					Pears					Other:		
Dry peas					Peas							
Fish					Plums/Prunes					7		
Pork					Potatoes					7		
Tuna					Squash					Please note changes to infant's feeding schedule on the back of this page.		
Turkey					Sweet							
					Potatoes							
Whole Egg					Other:							
Yogurt					Other:							
Other:					Other:							