

CACFP INDIVIDUAL INFANT FEEDING RECORD

FACILITY NAME:

INFANT NAME:

WEEK OF:

INFANT DATE OF BIRTH:

TYPE OF FORMULA OFFERED*:

MEAL PATTERN:

	BREAKFAST	LUNCH	SNACK
0-5 MONTHS	<ul style="list-style-type: none"> 4-6 oz. Breastmilk/formula 	<ul style="list-style-type: none"> 4-6 oz. Breastmilk/formula 	<ul style="list-style-type: none"> 4-6 oz. Breastmilk/formula
6-11 MONTHS	<ul style="list-style-type: none"> 6-8 oz. Breastmilk/formula 0-4 T Infant cereal (0-1/2 oz eq), meat, fish, poultry, whole egg, cooked dry beans or dry peas or 0-2 oz. of cheese or 0-4 oz. of cottage cheese or 0-4 oz. yogurt or a combination** 0-2 T Vegetable, fruit, or both** 	<ul style="list-style-type: none"> 6-8 oz. Breastmilk/formula 0-4 T Infant cereal (0-1/2 oz eq), meat, fish, poultry, whole egg, cooked dry beans or dry peas or 0-2 oz. of cheese or 0-4 oz. of cottage cheese or 0-4 oz. yogurt or a combination** 0-2 T Vegetable, fruit, or both** 	<ul style="list-style-type: none"> 2-4 oz. Breastmilk/formula 0-1/2 oz eq Bread or 0-1/4 oz eq crackers or 0-1/2 oz eq infant cereal (0-4 T)/ 0-1/4 oz eq ready-to-eat cereal (0-4 T rounds/flakes or 0-5 T puffed)** 0-2 T Vegetable, fruit, or both**

*If applicable **Required when infant is developmentally ready

INFANT FEEDING RECORD:

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
	Food Item	Serving Size	Food Item	Serving Size	Food Item	Serving Size	Food Item	Serving Size	Food Item	Serving Size
BREAKFAST										
AM SNACK										
LUNCH										
PM SNACK										