CACFP INFANT FEEDING PREFERENCE – PROVIDERS

Infant's Name_____Infant's Date of Birth_____

_____will feed your infant breastmilk provided by you and/or we
(Name of provider)
will provide iron fortified infant formula.

The infant formula provided by this provider is:_____

This provider participates in the Child and Adult Care Food Program (CACFP) and receives USDA reimbursement for serving nutritious meals to infants according to program requirements. Participation in this program requires providers to follow specific meal patterns according to the age of the infant.

Providers participating in the CACFP are required to offer infant formula to infants who are enrolled for child care. Parents (or guardians) may decline the infant formula offered by the provider, and supply the infant's formula.

Parents (or guardians) complete the following table(s) as appropriate:

Please mark your preference (choose all that apply)	**Today's Date** _____ **Birth – 3 months**	**Today's Date** _____ **4 – 7 months**	**Today's Date** _____ **8 – 11 months**
I will bring expressed breastmilk for my infant.			
I want the provider to provide the infant formula for my infant.			
I will bring the infant formula for my infant. Please list the kind of infant formula you will bring: _____			

According to CACFP requirements, in order to claim meals for reimbursement, the provider must provide infant cereal and other foods when your infant is developmentally ready to accept them.

Please mark your preference	**Today's Date** _____ **4 – 7 months**	**Today's Date** _____ **8 – 11 months**
I want the provider to provide the infant cereal and other foods for my infant.		
I will bring the infant cereal and/or other foods for my infant.		

Parent's (or guardian's) Signature_____Date of Signature_____

1. This form should be kept on file for each infant enrolled for child care.
2. This form should be kept current and accurate for each infant enrolled for child care until the infant reaches one year of age.
3. If the parent (or guardian) declines the formula and the provider provides meal and/or snack components, the meal may be claimed for reimbursement.
4. If the parent (or guardian) declines infant meals/snack, meals and snacks may NOT be claimed for reimbursement.

Claiming and Feeding Infants

Providers must offer at least one infant formula that meets the infant meal pattern requirements. A parent (or guardian) may decline the infant formula that is offered by the provider and supply an alternate infant formula. The provider must have a statement from the parent (or guardian) declining the infant formula offered by the provider in order to claim the meal.

According to CACFP requirements, in order to claim meals for reimbursement for infants 4 through 7 months, the provider is **required** to serve infant cereal and other foods when the infant is developmentally ready to accept them.

Providers must include in their program documentation the following elements in order to claim reimbursement for meals that are served to infants:

- Infant's name;
- Infant's date of birth;
- Name of provider;
- The name and type of infant formula the provider will provide;
- Whether the parent (or guardian):
    - Will bring the breastmilk;
    - Will bring the infant formula (Adequate information must be provided by the parent (or guardian) about the alternate infant formula to determine whether the infant formula meets infant meal pattern requirements (e.g., the name brand of the infant formula and whether the infant formula is iron-fortified).);
    - Will bring solid foods that the infant is developmentally ready to accept;
    - Wants the provider to provide the infant formula;
    - Wants the provider to provide infant cereal and other food items that the infant is developmentally ready to accept according to the Infant Meal Pattern;
- Parent's (or guardian's) signature; and
- Date of signature.

For an example, refer to the attached reference tool, *CACFP Infant Feeding Preference – Providers*.

Note: As situations change, such as a physician or recognized medical authority changing the infant's formula, the provider must update the information in the infant's file. The provider must update the information within one month of the infant moving from one age category to the next.

An infant formula is considered to meet program requirements when it:
- Meets requirements of the infant meal pattern; or
- Does not meet the infant meal pattern requirements, but you maintain a medical statement to support the substitution.