

**SELF-ASSESSMENT for AFTERSCHOOL PROGRAMS:
Criteria for 2008 San Mateo County Healthy Apple Awards**
Excellence in Nutrition & Physical Activity

Bronze Apple:	Commitment to improving nutrition & physical activity	B_{rz}		
Silver Apple:	High commitment to healthy nutrition & physical activity Meets or exceeds standards of California school health policies		S_{ilv}	
Gold Apple:	Highest standard of healthy nutrition & physical activity Significantly higher health standards than California school health policies			G_{ld}

*Instructions: Afterschool program staff can assess if their program has complied with the listed criteria during the past six months. If a criterion has been met (or not applicable), cross-off all the on that row. If a criterion has a "number" requirement, cross-off the number(s) that your program meets or exceeds. **Program Name & Site:** _____*

BEVERAGES:		B_{rz}	S_{ilv}	G_{ld}
<i>Beverages (if served or sold) must follow these criteria:</i>				
Water	• Always free and accessible to children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Milk	• Nonfat, 1%, or 2%	<input type="radio"/>		
	• Nonfat, 1%		<input type="radio"/>	<input type="radio"/>
	• Contains less than 27g sugar per 8oz (flavored milk)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nondairy beverage	• (e.g., Soy or rice milk) Contains less than 27g sugar per 8oz	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juice	• ≥50% fruit/vegetable juice, without added sweeteners	<input type="radio"/>		
	• 100% fruit/vegetable juice, without added sweeteners		<input type="radio"/>	<input type="radio"/>
	• Limit quantity: 4 – 6 oz/day (1-6yo); 7 – 12 oz/day (7-18yo)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electrolyte Replacement beverage	• Contain less than 42g sweetener per 20 oz., limited to only middle/high school age youth engaged in vigorous activity lasting ≥ 1 hr	<input type="radio"/>	<input type="radio"/>	
<i>Beverages PROHIBITED to be served or sold:</i>				
• Sodas: Any carbonated beverage		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Water ices (any frozen sweetened water)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Beverage with caffeine		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Beverage with added sweetener (natural or artificial)			<input type="radio"/>	<input type="radio"/>
• Any electrolyte replacement beverage				<input type="radio"/>
SNACK FOODS:		B_{rz}	S_{ilv}	G_{ld}
<i>Weekly Balance:</i>				
Different whole grain served at least _____ days per week.		2	3	5
Different protein source served at least _____ days per week.		1	2	3
Different fresh fruit or vegetable served at least _____ days per week.		2	3	5
<i>Daily Balance:</i>				
Number of different components that snacks must contain each day from the four listed: 1) milk, 2) meat or meat alternate, 3) vegetable or fruit or 100% juice, 4) whole-grains or enriched bread <i>(Two required for CAFCP Reimbursement)</i>		1	1	2
<i>Each food item served/sold has adhered to SB 12:</i>				
≤ 35% of total calories from fat				
≤ 10% of calories from saturated fat			<input type="radio"/>	<input type="radio"/>
≤ 35% of total weight from sugar				
≤ 175 calories for elementary school age; ≤ 250 calories for middle/high school age <i>[Exempt: Nuts, nut butters, seeds, eggs, cheese, fruits, vegetables (not fried), or legumes]</i>				
<i>Foods Specifically Prohibited:</i>				

