

# Welcome

Williamson County Juvenile Services knows that good nutrition and learning go hand in hand! For that reason, Williamson County Juvenile Services participates in the National School Lunch Program and offers students nutritionally balanced meals daily.



**What is the National School Lunch Program? Click on the link below for more information:**

## [National School Lunch Program \(NSLP\)](#)

\* A meal benefits application must be submitted each school year for those interested in the Free and Reduced Meal Program. Only one application is needed for each household unless the application is for a foster child, run away, homeless or migrant student.

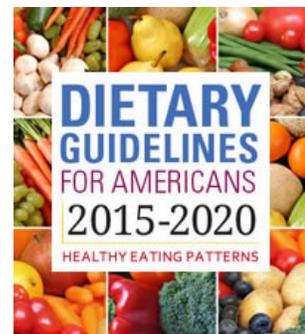
\* Applications can be printed from the links below and are available at the school office at 200 Wilco Way, Georgetown, TX 78626. Hours are 8:00am to 5:00pm Monday through Friday. If you have questions about school meal applications, please call 512-943-3218

[School Meal Application](#)

[Application Instructions](#)



Williamson County Juvenile Services has made a significant investment in improving the quality of school meals. Key enhancements include an increased fruits, vegetables, whole grains, and fat-free and low-fat fluid milk in our meals. We are also reducing the levels of sodium, saturated fat and eliminating added trans-fat in meals.



*click on icon to follow link*

## [2018-2019 School Year Menus](#)

Meals, foods and beverages served at schools meet state and federal requirements which are based on the USDA Dietary Guidelines. We provide students with access to a variety of appealing foods that meet the health and nutrition needs of students. [Use this link to get more information on the Williamson County Juvenile Services [Wellness Policy](#).]



## Special Diet and Allergy Information

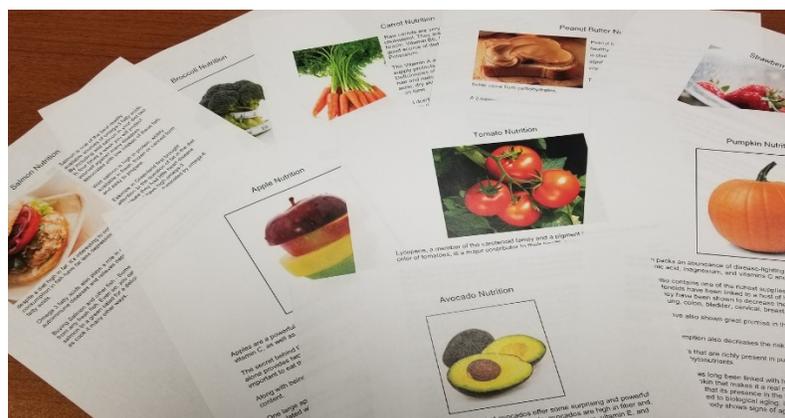
Students with life threatening food allergies, disabilities or other medical or dental needs will be met according to medical diet order.

### Medical Diets

- If a juvenile requires a modified diet for medical or dental purposes, documentation must be provided by a Physician, Dentist, Mid-Level Provider, or Registered Nurse.
- Ordering Medical Diets - The Licensed healthcare provider will submit a medical diet order form to the kitchen staff. The medical diet order form must be signed by a Licensed Physician or a Registered Nurse.
- If the juvenile's medical needs require special handling of food, then those medical needs will be met accordingly.

Additional details on Special Meal Accommodations may be found in our [Wellness Policy](#).

## Nutrition Education



Our campus provides a variety of educational topics during afternoon snack including food and nutrition topics.

## Universal Breakfast Program

Energize Your Day! Eat School Breakfast! The School Breakfast Program is now available to Day Students (JJAEP) as well as Resident Students. Williamson County Juvenile Services serves breakfast every day of the week and now serves breakfast to our Day students as well. Parents please stop by the school office to fill out a school meals application to see if you qualify for free or reduced meals. The application is easy to fill out and easy to understand. Also, you do not have to worry about your information being shared with others because application information is CONFIDENTIAL.



## Non-discrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider



## Directions for Applying For Free and Reduced-Price School Meals

Please use these instructions to complete the free or reduced-price school meals application. Submit one application per household, even if the children in the household attend more than one school in *Williamson County Juvenile Dept.* Please use a **pen** (not a pencil) when completing the application. The application must be filled out completely in order for the school to make a determination if the children in your household qualify for free or reduced-price school meals. **An incomplete application cannot be approved.** Please contact *Nancy Chisum ph. 512-943-3218 or email nchisum@wilco.org* with your questions.

### Step 1: List All Household Members Who Are Infants, Children, And Students Up to and Including Grade 12.

- **List** each child’s name.

*Print first name, middle initial, and last name for each child in the household in the spaces. If there are more children than lines, use the back of the application to record additional names.*

*Include all household members who are age 18 or under and are supported with the household’s income including children who are not enrolled in the district. Children do NOT have to be related to anyone in the household to be a part of the household.*

- **Mark** the box following the child’s name to show if the child is a student in the *Williamson County Juvenile Dept.*
- **Record** the child’s grade if the child is in school.
- **Check** the appropriate box if a child qualifies for free meals as participant in the foster care system, Head Start (including Early Head Start or Even Start) program or if a child meets the criteria for homeless, migrant, or runaway.

*Checking Foster indicates that a foster care agency or court has placed the child in your home. If the application is being submitted for foster children only, complete Step 1, skip Step 2, and complete Step 3.*

#### Participation in a Categorical Program

If all children in the household are participants in one of the following programs—*Foster, Head Start, Homeless, Migrant, or Runaway*, **skip** Step 2 and **complete** Step 3.

SNAP, TANF, and FDPIR: Do any household members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

*If a child or adult in the household participates in Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance to Needed Families (TANF), record the Eligibility Determination Group (EDG) number in the space.*

*If a child or adult in the household is a participant in Food Distribution Program for Households on Indian Reservations (FDPIR), check the box to indicate participation. The Williamson County Juvenile Dept. will contact you to obtain documentation of FDPIR participation.*

*If the students in the household are eligible based on SNAP, TANF, or FDPIR, skip Step 2 and complete Step 3.*

Reduced-Price Meal Income Eligibility Guidelines					
Family Size	Annually	Monthly	Twice per Month	Every Two Weeks	Weekly
1	\$22,459	\$1,872	\$936	\$864	\$432
2	\$30,451	\$2,538	\$1,269	\$1,172	\$586
3	\$38,443	\$3,204	\$1,602	\$1,479	\$740
4	\$46,435	\$3,870	\$1,935	\$1,786	\$893
5	\$54,427	\$4,536	\$2,268	\$2,094	\$1,047
6	\$62,419	\$5,202	\$2,601	\$2,401	\$1,201
7	\$70,411	\$5,868	\$2,934	\$2,709	\$1,355
8	\$78,403	\$6,534	\$3,267	\$3,016	\$1,508
For each additional family member add:					
	+ \$7,992	+ \$666	+ \$333	+ \$308	+ \$154

### Step 2: Report Income for All Household Members.

#### Part A. Total Household Members

- **Record** the total number of children and adults in the household in the appropriate box.

*This number MUST be equal to the number of household members listed in Step 1 and Step 2. It is very important to list all household members as the size of the household determines the household eligibility.*

#### Part B. Last Four Digits of Social Security Number (SSN) of an Adult Household Member

- **Provide** the last four digits of the Social Security number (SSN) of an adult in the household or check the box for no SSN.

*A social security number is not required to apply for these programs.*

#### Part C. Income for All Adult Household Members (Including Yourself, But Not Children)

- **Record** the first and last name of each adult in the household in the space provided.

If there are more adults in the household than available spaces, use the back of the application. **Children's income is reported in Part D.** Include all adults living in the household that share income and expenses, even if the adult is not related to anyone in the household and does not receive any income. Do not include adults that are not supported by the household's income and do not contribute income to the household.

- **Record** the amount of income the adult receives under the type of income: Working Earnings; Public Assistance/Child Support/Alimony; Pensions/Retirement/Social Security/Supplemental Security Income (SSI); and All Other.

Report all amounts in gross income only and in whole dollars. Gross income is the total income received before taxes or deductions. Ensure that the income reported has not been reduced by the amounts deducted for taxes, insurance premiums, or any other purpose. The Adult Income Information Box provides additional information on the types of income that need to be reported. Foster children may be included as a member of the household or may be included on a separate application.

Write a 0 in any field where there is no income to report. If you write 0 or leave any fields blank, you are certifying (promising) that there is no income to report. If local officials have known or available information that the household income was reported incorrectly, the application will be verified for cause.

- **Circle** how often each type of income is received (frequency).
  - W = Weekly
  - E = Every 2 Weeks
  - T = Twice per Month
  - M = Monthly
  - A = Annually

**Part D. Income for Children in the Household**

- **Record** total income for all children by how often income is received (frequency).

**Record adult income in Part C.**

Record the income of children individually under the frequency indicating how often the income is received.

The Child Income Information Box (on the right) provides additional information on the types of income that needs to be reported for children in the household.

<b>Adult Income Information Box</b>	
<b>Earnings from Work</b>	
<i>General Types of Income</i>	
<ul style="list-style-type: none"> <li>▪ Salary, wages, cash bonuses</li> <li>▪ Strike benefits</li> </ul>	
<i>U.S. Military</i>	
<ul style="list-style-type: none"> <li>▪ Allowances for off-base housing, food, and clothing</li> <li>▪ Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances)</li> </ul>	
<i>Self-Employed Worker</i>	
<ul style="list-style-type: none"> <li>▪ Net income from self-employment (farm or business)—calculated by subtracting the total operating expenses of the business from its gross receipts or revenue.</li> </ul>	
<b>Public Assistance/ Child Support/Alimony</b>	
<i>(Do not report the value of any cash value public assistance benefits NOT listed on the chart.)</i>	
<ul style="list-style-type: none"> <li>▪ Alimony payments</li> <li>▪ Cash assistance from State or local government</li> <li>▪ Child support payments if income is received from child support or alimony, only court-ordered payments should be reported here. Informal but regular payments should be reported as <i>other</i> income in the next part.</li> <li>▪ Unemployment benefits</li> <li>▪ Worker's compensation</li> </ul>	
<b>Pensions/Retirement/ Supplemental Security Income (SSI)</b>	
<ul style="list-style-type: none"> <li>▪ Annuities</li> <li>▪ Income from trusts or estates</li> <li>▪ Private Pensions or disability</li> <li>▪ Social Security (including railroad retirement and black lung benefits)</li> <li>▪ Supplemental Security Income (SSI)</li> <li>▪ Veteran's benefits</li> </ul>	
<b>All Other Income</b>	
<ul style="list-style-type: none"> <li>▪ Earned interest</li> <li>▪ Investment income</li> <li>▪ Regular cash payments from outside household</li> <li>▪ Rental income</li> </ul>	

**Step 3: Provide Contact Information and Adult Signature.**

- **Read** the certification statement.
- **Write** your current address and contact information in the space provided. Sharing a phone number, email address, or both is optional, but helps us reach you quickly if we need to contact you.
 

*If you have no permanent address, this does not make your children ineligible for free or reduced-price school meals.*
- **Print** the name of the adult signing the form, **sign** the form, and **record** today's date in the appropriate spaces.

All applications must be signed by an adult household member. By signing the application, the household member is promising that all information has been truthfully and completely reported. Before completing this section, please read the privacy and civil rights statements on the back of the application.

<b>Child Income Information Box</b>	
<b>Earnings from work</b>	
<i>For Example: A child has a job where she or he earns a salary or wages.</i>	
<b>Social Security, Disability Payments</b>	
<i>For Example: A child is blind or disabled and receives Social Security benefits.</i>	
<b>Social Security, Survivor's Benefits</b>	
<i>For Example: A parent is disabled, retired, or deceased, and their child receives social security benefits.</i>	
<b>Income from any other source</b>	
<i>For Example: A child receives income from a private pension fund, annuity, or trust.</i>	

**Step 4: Return the Application.**

- Return the application to the school office or mail to: *200 Wilco Way Georgetown, TX 78626 or fax to 512-943-3209.*

Williamson County Juvenile Dept., 2018-2019 Multi-Child Application for Free and Reduced-Price School Meals

This Box for School Use Only.

Complete one application per household. Please use a pen (not a pencil).

Date Withdrawn:

**Step 1:** Definition of Household Member: *anyone who is living with you and shares income and expenses, even if not related.* Children in Foster care; children who meet the definition of Homeless, Migrant, or Runaway or who participate in Head Start are eligible for free meals. Please read the directions for more information.

**A. List ALL Household Members Who Are Infants, Children, and Students up to and Including Grade 12.** If more spaces are needed, use the Additional Names section on the back.

List each child's name.

Student Attends School in District?

Optional: Student

Check all that apply.

First Name	MI	Last Name	Yes	No	Grade	ID Number	Foster	Head Start	Homeless	Migrant	Runaway
1.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
2.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
3.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
4.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				

**B. Participation in a Categorical Program**

- If every child listed in Step 1 is a participant any one of the following programs—Foster, Head Start, Homeless, Migrant, or Runaway, skip Step 2 and complete Step 3.
- SNAP, TANF, or FDPIR: Do any Household Members (including you) currently participate in SNAP, TANF, and/or FDPIR? If No, complete Steps 2 and 3. If Yes to SNAP/TANF > Write the Eligibility Determination Group (EDG) number in this space \_\_\_\_\_, skip Step 2, and complete Step 3. If Yes to FDPIR, check this box , skip Step 2, and complete Step 3.

**Step 2:** Please read the directions for more information for the following questions.

Report Income for ALL Household Members (Skip this step if you entered an EDG number or checked the box to indicate participation in FDPIR in Step 1).

**A. Total Household Members** (Children & Adults) \_\_\_\_\_

**B. Last Four Digits of Social Security Number (SSN) of an Adult Household Member:** XXX-XX \_\_\_\_  Check if no SSN

**C. Income for Adult Household Members** (Include Yourself, But Not Children. If more spaces are needed, use the Additional Names section on the back.)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total income (without deductions) for each source in whole dollars only. Indicate the frequency of income: W=Weekly, E=Every 2 Weeks, T=Twice per Month, M=Monthly, A=Annually. If they do not receive income from any source, write '0.' If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Adult's First/Last Name (Do not include the income of children in this section. The income of children goes in 2D.)	Work Earnings (Enter Amount)	Frequency (Circle One)	Public Assistance/ Child Support/ Alimony (Enter Amount)	Frequency (Circle One)	Pensions/Retirement/ Social Security/Supplemental Security Income (Enter Amount)	Frequency (Circle One)	All Other (Enter Amount)	Frequency (Circle One)
1.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A
2.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A
3.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A

**D. Income for Children in the Household** (Do not include adult income. Do report any type of regular income for children in the household. If more spaces are needed, use the Additional Names section on the back.)

Record total income by frequency for the children with income listed in Step 1.

	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually
1.	\$	\$	\$	\$	\$
2.	\$	\$	\$	\$	\$
3.	\$	\$	\$	\$	\$

**Step 3:** Please read the directions for more information on signing this form.

Provide Contact Information and Adult Signature. Return this application to Williamson County Juvenile Dept. 200 Wilco Way Georgetown, TX 78626 – or Fax to 512-943-3209.

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Street Address/Apt #

City

State

Zip

Daytime Phone and Email (Optional)

Printed Name of Adult Household Member Signing the Form

Signature of Adult Household Member Signing the Form

Today's Date

**Step 1: Additional Names**

A. List ALL Household Members Who Are Infants, Children, and Students up to and Including Grade 12. If more spaces are needed, use the Additional Household Member Sheet on the back.

List each child's name.

First Name	MI	Last Name	Student Attends School in District?		Grade	Optional: Student ID Number	Check all that apply.				
			Yes	No			Foster	Head Start	Homeless	Migrant	Runaway
5.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
6.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
7.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
8.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
9.			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				

**Step 2: Additional Names**

C. Income for Adult Household Members (Include Yourself, But Not Children)

Adult's First/Last Name (Do not include the income of children in this section. The income of children goes in 2D.)	Work Earnings (Enter Amount)	Frequency (Circle One)	Public Assistance/ Child Support/ Alimony (Enter Amount)	Frequency (Circle One)	Pensions/Retirement/ Social Security/Supplemental Security Income (Enter Amount)	Frequency (Circle One)	All Other (Enter Amount)	Frequency (Circle One)
4.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A
5.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A
6.	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A	\$	W-E-T-M-A

D. Income for Children in the Household (Do not include adult income. Do report any type of regular income for children in the household.)

Record total income by frequency for the children with income listed in Step 1.

	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually
4.	\$	\$	\$	\$	\$
5.	\$	\$	\$	\$	\$
6.	\$	\$	\$	\$	\$

The **Richard B. Russell National School Lunch Act** requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

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**Do Not Fill Out This Part. This Is For School Use Only.**

<i>Income Determination: Multiple income frequencies must be converted to annual amounts and combined to determine household income. Do not convert if only one income frequency is provided by the household. If converting income to annual, round only the final number—Annual Income Conversion: Weekly x 52   Every 2 Weeks x 26   Twice a Month x 24   Monthly x 12</i>							<b>Date Received:</b>			
Household Size: _____	Total Income: _____	Weekly <input type="checkbox"/>	Every 2 Weeks <input type="checkbox"/>	Twice a Month <input type="checkbox"/>	Monthly <input type="checkbox"/>	Annually <input type="checkbox"/>	<b>Categorical Determination</b> <input type="checkbox"/>	<b>Eligibility:</b> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Denied <input type="checkbox"/>		
Reviewing/Determining Official's Signature/Date		Confirming Official's Signature/Date								

Proposed 2/16  
 Implemented: 3/16  
 Revised: 11/16,2/17,2/18

# WILLIAMSON COUNTY JUVENILE TEXAS



This institution is an equal opportunity provider.

Weekly Average 3400 Calories Per Day  
 A choice of Skim or 1% milk will be offered at breakfast & lunch  
 Final Rule Nutrition Standards in the National School Lunch and School Breakfast Programs (Grades 9-12) – Jan. 2012

Week: **1**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>Meal Name: Breakfast</b>						
Fresh Seasonal Fruit 1 each	Fresh Seasonal Fruit 1 each	Diced Peaches 1/2 cup	Fresh Seasonal Fruit 1 each	Fresh Seasonal Fruit 1 each	Tropical Fruit Mix 1/2 cup	Berry Mix 1/2 cup
Toasted Oats Cereal 1 cup	Raisin Bran Cereal 1 cup	Toasted Oats Cereal 1 cup	Whole Grain Sweetened Oatmeal w/ Cinnamon LF 1/2 cup	T. Sausage Breakfast Pizza (WG) 1/16 cut	Cheesy Scrambled Eggs 3 ozw	Bran Flakes Cereal 1 cup
Pork Ham 1 ozw	Cheesy Scrambled Eggs 3 ozw	Whole Grain Bagel 1 each	LowFat Cream Cheese 1 each	Cottage Fries LF 1/2 cup	W/S Flour Tortilla (6") 1 each	Whole Grain French Toast Sticks 2 each
Whole Wheat English Muffin 1 each	Whole Wheat Bread 1 slice	LowFat Cream Cheese 1 each	Whole Grain Bagel 1 each	100% Orange Juice (4 oz) 1 each	Taco Sauce 1 packet	Syrup 2 fl oz
100% Apple Juice (4 oz) 1 each	100% Apple Juice (4 oz) 1 each	Potatoes Lyonnaise LF 1/2 cup	100% Apple Juice (4 oz) 1 each	Milk-Student Choice (Half Pint) 1 each	100% Apple Juice (4 oz) 1 each	100% Apple Juice (4 oz) 1 each
Milk-Student Choice (Half Pint) 1 each	Milk-Student Choice (Half Pint) 1 each	100% Apple Juice (4 oz) 1 each	Milk-Student Choice (Half Pint) 1 each		Milk-Student Choice (Half Pint) 1 each	Milk-Student Choice (Half Pint) 1 each

<b>Meal Name: Lunch</b>						
Whole Grain Corn Dog 1 each	Italian Tomato Sauce (2.5 MMA*) 6 ozw	Whole Grain T. Sausage & Cheese Pizza 1 each	100% Beef Patty (4 ozw raw) 1 patty	Whole Grain Cheesy Brown Rice & Broccoli Casserole (2.5 MMA*) 12 ozw	Beef Franks (2 oz @) 1 each	Whole Grain Cajun Jambalaya (2.5 MMA*) 12 ozw
Ketchup & Mustard Packets 1 each	Whole Grain Rotini LF 1/2 cup	Broccoli Sunflower Salad LF 3/4 cup	Ketchup & Mustard Packets 1 each	Carrots LF 3/4 cup	Ketchup & Mustard Packets 1 each	Carrots LF 1/2 cup
Parsley Potatoes LF 1 1/2 cup	Irish Blend Vegetables LF 1/2 cup	Kettle Blend Mixed Vegetables 1/2 cup	Sliced Lettuce Leaf 1 each	Peas LF 1/2 cup	Whole Wheat Hot Dog Bun 1 each	Garden Salad 1 cup
Cheesy Green Beans 1/2 cup	Garden Salad 1 cup	Orange 1 each	Tomato Slice 1 slice	Whole Wheat Bread 1 slice	Parsley Potatoes LF 1 cup	FF Italian Dressing, pc 1 each
Apple 1 each	FF Italian Dressing, pc 1 each	Mixed Fruit (Canned) 1/2 cup	Pickle Slice 2 slice	Orange 1 each	Conney Pinto Beans LS 3/4 cup	Whole Wheat Bread 1 slice
Milk-Student Choice (Half Pint) 1 each	Whole Wheat Bread 1 slice	Milk-Student Choice (Half Pint) 1 each	Whole Wheat Hamburger Bun 1 each	Diced Peaches 1/2 cup	Mixed Fruit (Canned) 1 cup	Apple 1 each
	Diced Pears (canned) 1 cup		Scalloped Potatoes LF 1 1/2 cup	Milk-Student Choice (Half Pint) 1 each	Milk-Student Choice (Half Pint) 1 each	Milk-Student Choice (Half Pint) 1 each
	Milk-Student Choice (Half Pint) 1 each		Corn LF 1/2 cup			
			Apple 1 each			
			Gelatin Dessert 1/2 cup			
			Milk-Student Choice (Half Pint) 1 each			

<b>Meal Name: Dinner</b>						
Chili con Carne w/ Beans (2 oz*) 12 ozw	BBQ Chicken Quarter 1 each	Crispy Chicken Patty (3 ozw each) 1 patty	Tator Tot Casserole* 10 ozw	Country Patty (3 ozw each) 1 patty	Lasagna (2 oz*/1 oz cheese) 12 ozw	Teriyaki Chicken Quarter 1 each
Parsley Rice 1 1/4 cup	Mashed Potatoes 1 1/2 cup	BBQ Sauce 1 fl oz	Irish Blend Vegetables 3/4 cup	Macaroni w/ Tomato Sauce 1 1/4 cup	Irish Blend Vegetables 3/4 cup	Rice O'Brien 1 1/2 cup
Kettle Blend Mixed Vegetables 3/4 cup	Gravy 3 fl oz	Hamburger Bun 1 each	Enriched Bread 2 slice	Garden Salad 1/2 cup	Toasted Salad w/ Cabbage 1/2 cup	Irish Blend Vegetables 3/4 cup
Southern Cornbread 1/4 cut	Corn 3/4 cup	Tator Tots 1 cup	Margarine, pc 2 each	Ranch Dressing, pc 1 each	FF Italian Dressing, pc 1 each	Bakery Biscuit (1/80 2@) 1/40 cut
Margarine, pc 2 each	Bakery Biscuit (1/80 2@) 1/40 cut	Carrots 3/4 cup	Iced White Cake 1/54 cut	Cheesy Green Beans 3/4 cup	Enriched Bread 2 slice	Margarine, pc 2 each
Fresh Baked Large Chocolate Chip Cookie 3 ozw	Margarine, pc 2 each	Fresh Baked Large Sugar Cookie 3 ozw	Lemonade 1 cup	Bakery Biscuit (1/80 2@) 1/40 cut	Margarine, pc 2 each	Apple Kettle Crisp (1/4 c fruit) 3/4 cup
Lemonade 1 cup	Snickerdoodle Cookie 3 ozw	Sweetened Tea 1 cup		Margarine, pc 2 each	Snickerdoodle Cookie 3 ozw	Lemonade 1 cup
	Kool-Aid 1 cup			Fresh Baked Large Sugar Cookie 3 ozw	Sweetened Tea 1 cup	
				Kool-Aid 1 cup		

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FLM QUARTERLY MENU REVIEW (Initial/date) Q1 \_\_\_\_\_ Q2 \_\_\_\_\_ Q3 \_\_\_\_\_ Q4 \_\_\_\_\_

In accordance with ACA Standard (ref. 4-ALDF-4A-07) (MANDATORY) Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established daily servings.

Reviewed 2/18

Aramark Dietitian's Signature: \_\_\_\_\_

Client's Signature: \_\_\_\_\_

Date: 3/6/18

FLM Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Proposed 2/16  
 Implemented: 3/16  
 Revised: 11/16,2/17,2/18

# WILLIAMSON COUNTY JUVENILE TEXAS



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 Final Rule Nutrition Standards in the National School Lunch and School Breakfast Programs (Grades 9-12) – Jan. 2012

Week: **1**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>Meal Name: Afternoon Snack</b>	Fresh Seasonal Fruit 1 each Corn Flakes Cereal 1 1/2 cup Milk (Half Pint) 1 each	Peanut Butter 2 tablespoon Grape Jelly 1 fl oz Enriched Bread 2 slice Milk (Half Pint) 1 each	Banana Muffin (1/54 2@) 1/27 cut Grape Jelly 1 packet Chocolate Milk Fat Free (Half Pint) 1 each	Peanut Butter 2 tablespoon Grape Jelly 1 fl oz Enriched Bread 2 slice Chocolate Milk Fat Free (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Streusel Coffecake 1/27 cut Milk (Half Pint) 1 each	Fresh Carrot Sticks or Coins 4 1/2 ozw French Dressing, pc 1 each Chocolate Milk Fat Free (Half Pint) 1 each	Blueberry Muffins (1/54 2@) 1/27 cut Grape Jelly 1 packet Chocolate Milk Fat Free (Half Pint) 1 each
<b>Meal Name: Evening Snack</b>	Vanilla Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Fruit & Nut Trail Mix 1 each 100% Orange Juice (4 oz) 1 each	Single Serve Corn Chips (1 oz) 1 bag 100% Orange Juice (4 oz) 1 each	Duplex Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Graham Crackers 2 pack 100% Apple Juice (4 oz) 1 each	Vanilla Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Potato Chips (1 oz bag) 1 bag 100% Orange Juice (4 oz) 1 each

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Reviewed 2/18

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Client's Signature:

Date: 3/6/18

FLM Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Proposed 2/16  
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**Week: 2**

**MONDAY**

**TUESDAY**

**WEDNESDAY**

**THURSDAY**

**FRIDAY**

**SATURDAY**

**SUNDAY**

**Meal Name: Breakfast**

Fresh Seasonal Fruit	1 each	Fresh Seasonal Fruit	1 each	Diced Peaches	1/2 cup	Fresh Seasonal Fruit	1 each	Berry Mix	1/2 cup	Fresh Seasonal Fruit	1 each	Fresh Seasonal Fruit	1 each
Toasted Oats Cereal	3/4 cup	T. Sausage Breakfast Pizza (WG)	1/16 cut	Whole Grain Sweetened Oatmeal w/ Cinnamon LF	1/2 cup	Scrambled Eggs	3 ozw	Toasted Oats Cereal	1 cup	Bran: Flakes Cereal	3/4 cup	Whole Grain Sweetened Oatmeal w/ Cinnamon LF	1/2 cup
Scrambled Eggs	3 ozw	Potatoes Lyonnaise LF	1/3 cup	Whole Grain French Toast Sticks	2 each	WG Flour Tortilla (6")	1 each	Pork Ham	1 ozw	Pork Sausage Patty	1 each	Whole Wheat Pancakes	2 each
Whole Wheat English Muffin	1 each	100% Apple Juice (4 oz)	1 each	Syrup	2 fl oz	Taco Sauce	1 packet	Whole Wheat Bread	1 slice	Cheesy Scrambled Eggs	2 ozw	Syrup	2 fl oz
100% Apple Juice (4 oz)	1 each	Milk-Student Choice (Half Pint)	1 each	100% Apple Juice (4 oz)	1 each	Potatoes Lyonnaise LF	1/3 cup	100% Orange Juice (4 oz)	1 each	Whole Wheat English Muffin	1 each	100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each			Milk-Student Choice (Half Pint)	1 each	100% Apple Juice (4 oz)	1 each	Milk-Student Choice (Half Pint)	1 each	100% Apple Juice (4 oz)	1 each	Milk-Student Choice (Half Pint)	1 each
						Milk-Student Choice (Half Pint)	1 each			Milk-Student Choice (Half Pint)	1 each		

**Meal Name: Lunch**

Whole Grain Fish Sticks (CN)	4 each	Orange Chicken Stir Fry	3/4 cup	Sloppy Joe (2.5 MMA*)	5 ozw	Ranch Chicken Wrap (2 MMA)	1 each	100% Beef Patty (4 ozw raw)	1 patty	Enchilada Filling (2.5 MMA*)	5 ozw	Whole Grain Corn Dog	1 each
Tartar Sauce	1 packet	Whole Grain Brown Rice LF	1 cup	Whole Wheat Hamburger Bun	1 each	Pickle Slice	2 slice	Ketchup & Mustard Packets	1 each	Corn LF	3/4 cup	Ketchup & Mustard Packets	1 each
Broccoli Sunflower Salad LF	3/4 cup	Garden Salad	1 cup	Garden Salad	1 cup	Whole Grain Mac & Cheese	1/2 cup	Sliced Lettuce Leaf	1 each	Shredded Lettuce	1/2 cup	BBQ Pinto Beans LF	1 cup
Kettle Blend Mixed Vegetables LF	1/2 cup	FF Italian Dressing, pc	1 each	FF Italian Dressing, pc	1 each	Sweet Potato Fries	4 ozw	Tomato Slice	1 slice	WG Flour Tortilla (6")	2 each	Peas & Carrots LF	1/2 cup
Whole Wheat Bread	1 slice	Peas LF	1/2 cup	Carrots LF	1/2 cup	Corn O'Brien LF	1/2 cup	Pickle Slice	2 slice	Taco Sauce	1 packet	Diced Peaches	1 cup
Applesauce	1 cup	Diced Peas (canned)	1 cup	Pineapple Chunks (canned)	1/2 cup	Pineapple Chunks (canned)	1 cup	Whole Wheat Hamburger Bun	1 each	Orange	1 each	Milk-Student Choice (Half Pint)	1 each
Milk-Student Choice (Half Pint)	1 each	Red Gelatin	1/2 cup	Orange	1 each	Milk-Student Choice (Half Pint)	1 each	Potato Salad LF/LS	1 cup	Mixed Fruit (Canned)	1/2 cup		
		Milk-Student Choice (Half Pint)	1 each	Milk-Student Choice (Half Pint)	1 each			Irish Blend Vegetables LF	3/4 cup	Milk-Student Choice (Half Pint)	1 each		
								Apple	1 each				
								Milk-Student Choice (Half Pint)	1 each				

**Meal Name: Dinner**

BBQ Beef Brisket Slices (3 oz beef)	4 ozw	Chicken Nuggets	5 each	Baked Meatloaf (3 ozw each)	1 patty	Chili con Carne w/ Beans (3 oz*)	12 ozw	Cajun Chicken Quarter	1 each	Gravy Chicken Patty (3 ozw each)	1 patty	Tator Tot Casserole*	10 ozw
BBQ Sauce	1/2 fl oz	Cottage Fries	1 1/2 cup	Mashed Potatoes	1 1/2 cup	Rice	1 1/4 cup	Macaroni & Cheese	1 1/2 cup	Rice	1 1/2 cup	Irish Blend Vegetables	3/4 cup
Pickle Slice	2 slice	Ketchup	2 packet	Gravy	3 fl oz	Cheesy Green Beans	3/4 cup	Garden Salad	1/2 cup	Gravy	3 fl oz	Bakery Biscuit (1/80 2@)	1/40 cut
Hamburger Bun	1 each	Carrots	3/4 cup	Kettle Blend Mixed Vegetables	3/4 cup	Southern Cornbread	1/54 cut	Ranch Dressing, pc	1 each	Kettle Blend Mixed Vegetables	3/4 cup	Margarine, pc	2 each
Macaroni & Cheese	1 1/2 cup	Enriched Bread	2 slice	Bakery Biscuit (1/80 2@)	1/40 cut	Margarine, pc	2 each	Fresh Baked Large Sugar Cookie	3 ozw	Bakery Biscuit (1/80 2@)	1/40 cut	Fruity Oatmeal Bar	1/54 cut
Peas	3/4 cup	Margarine, pc	2 each	Margarine, pc	2 each	Fresh Baked Large Peanut Butter Cookie	3 ozw	Sweetened Tea	1 cup	Margarine, pc	2 each	Kool-Aid	1 cup
Fresh Baked Large Oatmeal Cookie	3 ozw	Fresh Baked Large Chocolate Chip Cookie	3 ozw	Iced Chocolate Cake	1/54 cut	Kool-Aid	1 cup			Fresh Baked Large Oatmeal Cookie	3 ozw		
Kool-Aid	1 cup	Sweetened Tea	1 cup	Lemonade	1 cup					Lemonade	1 cup		

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Reviewed 2/16

Aramark Dietitian's Signature:

Client's Signature:

Date:

3/16/18

FLM Signature:

Date:

Proposed 2/16  
 Implemented: 3/16  
 Revised: 11/16,2/17,2/18

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 Final Rule Nutrition Standards in the National School Lunch and School Breakfast Programs (Grades 9-12) – Jan. 2012

Week: **2**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>Meal Name: Afternoon Snack</b>	Fresh Seasonal Fruit 1 each Graham Crackers 3 pack Grape Jelly 1 packet Milk (Half Pint) 1 each	Peanut Butter 2 tablespoon Grape Jelly 1 fl oz Enriched Bread 2 slice Chocolate Milk Fat Free (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Corn Flakes Cereal 1 1/2 cup Milk (Half Pint) 1 each	Blueberry Muffins (1/54 2oz) 1/27 cut Grape Jelly 1 packet Milk (Half Pint) 1 each	Peanut Butter 2 tablespoon Grape Jelly 1 fl oz Enriched Bread 2 slice Chocolate Milk Fat Free (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Streusel Coffeecake 1/27 cut Milk (Half Pint) 1 each	Celery Sticks (3/4c) 4 ozw Peanut Butter 2 tablespoon Chocolate Milk Fat Free (Half Pint) 1 each
<b>Meal Name: Evening Snack</b>	Duplex Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Popcorn 1 ozw 100% Orange Juice (4 oz) 1 each	Single Serve Corn Chips (1 oz) 1 bag 100% Orange Juice (4 oz) 1 each	Duplex Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Pretzels, pc 1 each 100% Apple Juice (4 oz) 1 each	Graham Crackers 2 pack 100% Orange Juice (4 oz) 1 each	Potato Chips (1 oz bag) 1 bag 100% Orange Juice (4 oz) 1 each

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Reviewed 2/18

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Client's Signature:

Date:

3/6/18

FLM Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Proposed 2/16  
 Implemented: 3/16  
 Revised: 11/16, 2/17, 2/18

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**Week: 3**  
**MONDAY**  
**Meal Name: Breakfast**

**TUESDAY**

Fresh Seasonal Fruit	1 each
Cinnamon Oatmeal LF	1/2 cup
LowFat Cream Cheese	1 each
Whole Grain Bagel	1 each
Cottage Fries LF	1/2 cup
100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**WEDNESDAY**

Diced Peaches	1/2 cup
Raisin Bran Cereal	3/4 cup
Whole Grain Breakfast Burrito	1 each
Potatoes Lyonnaise LF	1/2 cup
100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**THURSDAY**

Fresh Seasonal Fruit	1 each
Toasted Oats Cereal	3/4 cup
Pork Sausage Patty	1 each
Whole Wheat English Muffin	1 each
100% Orange Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**FRIDAY**

Tropical Fruit Mix	1/2 cup
T. Sausage Breakfast Pizza (WG)	1/16 cut
O'Brien Potatoes LF	1/2 cup
100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**SATURDAY**

Fresh Seasonal Fruit	1 each
Cinnamon Oatmeal LF	1/2 cup
Cheesy Scrambled Eggs	3 ozw
Whole Wheat Bread	1 slice
100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**SUNDAY**

Berry Mix	1/2 cup
Raisin Bran Cereal	3/4 cup
Whole Wheat Pancakes	2 each
Syrup	2 fl oz
100% Apple Juice (4 oz)	1 each
Milk-Student Choice (Half Pint)	1 each

**Meal Name: Lunch**

Glazed BBQ Patty (3 ozw each)	1 patty
BBQ Sauce	1 fl oz
Whole Wheat Hamburger Bun	1 each
Scalloped Potatoes LF	3/4 cup
Cheesy Green Beans	1/2 cup
Apple	1 each
Red Gelatin	1 cup
Milk-Student Choice (Half Pint)	1 each

Oven Fried Chicken Leg Quarter	1 each
BBQ Pinto Beans LF	3/4 cup
Broccoli	1/2 cup
WG Dinner Roll	2 each
Diced Pears (canned)	1 cup
Milk-Student Choice (Half Pint)	1 each

T. Hot Dogs (1.5 oz each)	1 each
Baked Beans	1/2 cup
Carrots LF	3/4 cup
Garden Salad	1 cup
FF Italian Dressing, pc	1 each
Whole Wheat Bread	2 slices
Applesauce	1 cup
Milk-Student Choice (Half Pint)	1 each

Sloppy Joe (2.5 MMA*)	4 ozw
Whole Wheat Hamburger Bun	1 each
Cajun Potatoes LF	1 cup
Irish Blend Vegetables	1/2 cup
Applesauce	1 cup
Milk-Student Choice (Half Pint)	1 each

Whole Grain T. Sausage & Cheese Pizza	1 each
Whole Grain Mac & Cheese	1 cup
Corn & Carrots LF	1/2 cup
Garden Salad	1 cup
FF Italian Dressing, pc	1 each
Orange	1 each
Diced Peaches	1/2 cup
Milk-Student Choice (Half Pint)	1 each

Southwest Burrito Filling (2.75 MMA*)	6 ozw
Cheese Sauce	1 fl oz
Shredded Lettuce	1 cup
Corn LF	3/4 cup
WG Flour Tortilla (6")	2 each
Taco Sauce	1 packet
Apple	1 each
Milk-Student Choice (Half Pint)	1 each

BBQ Chicken Quarter	1 each
Baked Beans	1/2 cup
Carrots LF	1/2 cup
WG Dinner Roll	2 each
Pineapple Chunks (canned)	1 cup
Milk-Student Choice (Half Pint)	1 each

**Meal Name: Dinner**

Grilled Cheese Sandwich (2oz cheese)	1 each
Ranch Pinto Beans	1/2 cup
Kettle Blend Mixed Vegetables	3/4 cup
Apple Cobbler	1/2 cup
Sweetened Tea	1 cup

Whole Grain Fish Sticks (CN)	4 each
Tartar Sauce	1 packet
Macaroni & Cheese	1 1/2 cup
Garden Salad	1/2 cup
Ranch Dressing, pc	1 each
Southern Cornbread	1/54 cut
Margarine, pc	2 each
Snickerdoodle Cookie	3 ozw
Lemonade	1 cup

BBQ Beef Brisket Slices (3 oz beef)	4 ozw
BBQ Sauce	1/2 fl oz
Pickle Slice	2 slices
Hamburger Bun	1 each
Mashed Potatoes (1.5 c) w/Beef Gravy (3 fl oz)	1 serving
Corn	3/4 cup
Fresh Baked Large Oatmeal Cookie	3 ozw
Kool-Aid	1 cup

Southwest Burrito Filling (2 oz*)	10 ozw
Enchilada Sauce	2 fl oz
Rice	1 1/2 cup
Shredded Lettuce	1/2 cup
Taco Sauce	1 packet
Flour Tortilla (6")	2 each
Fresh Baked Large Oatmeal Cookie	3 ozw
Sweetened Tea	1 cup

Meatballs (1/2 oz each)	6 each
Italian Tomato Sauce	4 fl oz
Hot Dog Bun	1 each
French Fries	1 cup
Cheesy Green Beans	3/4 cup
Lemon Cake w/ Powdered Sugar Topping	1/54 cut
Kool-Aid	1 cup

Cheesy Macaroni w/ T. Ham (2 oz diced ham)	12 ozw
Collage Fries	1 1/4 cup
Carrots	3/4 cup
Bakery Biscuit (1/80 2@)	1/40 cut
Margarine, pc	2 each
Fresh Baked Large Sugar Cookie	3 ozw
Lemonade	1 cup

T. Sausage Fajita Wrap (3 oz sausage)	1 each
Rice O'Brien	1 1/2 cup
Garden Salad	1/2 cup
Ranch Dressing, pc	1 each
Taco Sauce	1 packet
Snickerdoodle Cookie	3 ozw
Sweetened Tea	1 cup

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**FLM QUARTERLY MENU REVIEW (Initial/date) Q1 Q2 Q3 Q4**

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Reviewed 2/18

Aramark Dietitian's Signature:

Client's Signature:

Date: 3/6/18

FLM Signature:

Date:

Proposed 2/16  
 Implemented: 3/16  
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Week: **3**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>Meal Name: Afternoon Snack</b>	Blueberry Muffins (1/54 2@) 2/27 cut Grape Jelly 1 packet Milk (Half Pint) 1 each	T. Salami 2 ozw Mayo Dressing & Mustard Packets 1 each Enriched Bread 2 slice Chocolate Milk Fat Free (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Corn Flakes Cereal 1 1/2 cup Milk (Half Pint) 1 each	Peanut Butter 3 tablespoon Grape Jelly 1 fl oz Enriched Bread 2 slice Milk (Half Pint) 1 each	Fresh Broccoli 3/4 cup Ranch Dressing, pc 1 each Milk (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Frosted Brownie 1/54 cut Milk (Half Pint) 1 each	Fresh Seasonal Fruit 1 each Streusel Coffeecake 1/27 cut Chocolate Milk Fat Free (Half Pint) 1 each
<b>Meal Name: Evening Snack</b>	Vanilla Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Popcorn 1 ozw 100% Orange Juice (4 oz) 1 each	Duplex Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Pretzels, pc 1 each 100% Orange Juice (4 oz) 1 each	Graham Crackers 2 pack 100% Apple Juice (4 oz) 1 each	Duplex Sandwich Cookies 4 each 100% Orange Juice (4 oz) 1 each	Potato Chips (1 oz bag) 1 bag 100% Orange Juice (4 oz) 1 each

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Client's Signature: \_\_\_\_\_

Date: 3/6/18

FLM Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Williamson County Juvenile Services Wellness Policy On Physical Activity and Nutrition

## Preamble

Whereas, juveniles need access to healthful foods and opportunities to be physically active in order to grow, learn, and thrive;

Whereas, obesity rates have tripled in adolescents over the last two decades, and physical inactivity and excessive calorie intake are the predominant causes of obesity;

Whereas, heart disease, cancer, stroke, and diabetes are responsible for two-thirds of the deaths in the United States, and major risk factors for those diseases, including unhealthy eating habits, physical inactivity, and obesity, often are established in childhood;

Whereas, 33% of high school juveniles do not participate in sufficient vigorous physical activity and 72% of high school juveniles do not attend daily physical education classes;

Whereas, only 2% of children and juveniles (2 to 19 years) eat a healthy diet consistent with the five main recommendations from the My Plate Food Guide;

Whereas, community participation is essential to the development and implementation of successful school wellness policies;

Thus, Williamson County Juvenile Services and the Juvenile Justice Alternative Education Program (J.J.A.E.P.) are committed to providing an environment that promotes and protects juvenile's health, well-being, and the ability to learn by supporting healthy eating and physical activity. Therefore, it is the policy of Williamson County Juvenile Services and the J.J.A.E.P. that:

- All juveniles will have the opportunity, support, and encouragement to be physically active on a regular basis.
- Foods and beverages served will meet the nutrition recommendations of the *National School Lunch, Breakfast and Afterschool Care Programs*.
- Qualified nutrition professionals will continue to provide juveniles with a variety of nutritious and appealing foods that meet the health and nutrition needs of the juveniles in our facilities. Williamson County Juvenile Services will accommodate the religious, ethnic, and cultural diversity of all the juveniles participating in our programs. Juveniles will be served their meals in a clean and safe environment, and all juveniles will be given adequate time to eat.
- To the maximum extent practicable, all facilities will participate in the National School Lunch, Breakfast and Afterschool Care Programs. The J.J.A.E.P. will provide nutrition education and physical education to foster lifelong habits of healthy eating and physical activity.

## **TO ACHIEVE THESE POLICY GOALS:**

### **I. Facility Health Councils**

Williamson County Juvenile Services Detention, Core Residential Treatment Program and J.J.A.E.P. staff will work jointly with our food service provider and our in-house health care professionals to develop, implement, monitor, review, and, as necessary, revise facility nutrition and physical activity policies.

### **II. Nutritional Quality of Foods and Beverages Served through the National School Lunch, Breakfast and Snack Programs will:**

- Be appealing and attractive to juveniles;
- Be served in a clean and safe setting;
- Meet, at a minimum, nutrition requirements established by the National School Lunch, Breakfast and Afterschool Care Programs, local and state guidelines, and federal statutes and regulations, and reviewed by our contract food service providers dietitian;
- Offer a variety of fruits and vegetables;
- Offer at least two (2) choices from non-fat flavored, non-fat unflavored or 1% low-fat, or USDA approved low-fat lactose free or lactose reduced milk substitutes and

Williamson County Juvenile Services facilitators, and other designated staff will sample new entrees. Juveniles will have surveys available to them to comment on all menu items, in order to identify new, healthful, and appealing food choices. Juveniles have the right to report any problems or complaints, without fear of punishment or retaliation, regarding food service through an established grievance process. In addition, all Williamson County Juvenile Services' staff and J.J.A.E.P. staff will either provide information and answer questions about the nutritional content of meals to parents and juveniles upon request or direct them to a facilitator or designated staff who will answer their questions or complaints. Menus will be posted daily in the Detention and CORE cafeteria areas.

### **Free, Reduced-Priced and Paid Meals**

Williamson County Juvenile Services' staff, J.J.A.E.P. staff, and our food service provider will make every effort to eliminate any social stigma attached to, and prevent the overt identification of juveniles who are eligible for free, reduced-price and paid meals:

It is against the law to make others in the cafeteria aware of the eligibility status of juveniles for free, reduced price, or "paid" meals.

### **Scheduling Meal Times**

- Juveniles will be provided at least 15 minutes to eat after sitting down for

breakfast and at least 15 minutes to eat after sitting down for lunch;

- No other activity shall be scheduled during juveniles appointed meal periods unless juveniles may eat during such activities;
- Monday through Friday breakfast is served to CORE residents at approximately 6:55 a.m.
- Monday through Friday breakfast is served to Detention residents as follows:  
Unit A 7:10 Unit C 7:30 a.m. Unit D 7:50 a.m. Unit B 8:10 a.m.
- Monday through Friday lunch is served to CORE residents at approximately 11:40 a.m.
- Monday through Friday lunch is served to Detention residents as follows: Unit A 11:30 a.m., Unit C 11:50 a.m., Unit D 12:10 p.m., Unit B 12:30 p.m.
- Monday through Friday lunch is served to J.J.A.E.P. students at approximately 11:40 a.m.
- Monday through Friday after Afterschool Care Program snack is served to the CORE residents and Detention residents at approximately 3:30 pm to 4:00 p.m.
- Monday through Friday Dinner is served to Detention residents as follows: Unit A 5:45 p.m., Unit C 6:00 p.m., Unit D 6:15 p.m. Unit B 6:30 p.m.
- Monday through Friday Dinner is served to CORE residents at approximately 5:30 p.m.

### **Washing Hands before Meals and Snacks**

- Juveniles shall have access to hand washing or hand sanitizing before they eat meals or snacks.

### **Dental Hygiene**

- CORE and Detention residents will be given the opportunity and encouraged to take responsible steps to accommodate tooth-brushing regimens to promote and develop good oral health practices.

### **Qualifications of Facility Food Service Staff**

Qualified nutrition professionals employed by Williamson County Juvenile Services contracted food service provider will cook and serve all meals and snacks. Williamson County Juvenile Services' contracted food service provider managers will re-train their staff every time a corrective action is required. Williamson County Juvenile Services' contracted food service provider will provide their staff with training opportunities as mandated by the USDA Professional Standards for School Nutrition Program Employees. Williamson County Juvenile Services' in house medical staff will stay abreast of any special nutritional needs of all juveniles that are court ordered to participate in our programs. Williamson County Juvenile Services will provide continuing professional development and training for all Williamson County Juvenile Services facilitators, according to their level of responsibility

and the requirements of the USDA Professional Standards.

### **Sharing of Foods and Beverages**

Juveniles shall be discouraged from sharing their foods or beverages with one another during meal or snack times.

### **Menus and Nutrition**

The menu operates on a 3 week cycle rotation which begins on Monday and ends on Sunday. Daily menus are posted in both the CORE and Detention cafeteria areas. Menus shall be reviewed and approved annually by a professional licensed dietitian and the Williamson County Juvenile Services Financial Director. Menus are to be kept on file for one year.

Three meals plus an afternoon snack and evening snack will be served over a 24 hour period with no more than 14 hours between the evening meal and breakfast. Each meal shall have a scheduled meal time and two of the meals shall be hot meals.

Qualified nutrition professionals will provide juveniles with a variety of nutritious and appealing foods that meet USDA and National School Breakfast, Lunch and Afterschool Care Program guidelines. Williamson County Juvenile Services will accommodate the medical and religious dietary needs of all the juveniles participating in our programs, however, diets that pertain to juvenile preferences cannot be accommodated. Juveniles will be served their meals in a clean and safe environment, and all juveniles will be given adequate time to eat.

### **Medical Diets**

- If a juvenile requires a modified diet for medical or dental purposes, documentation must be provided by a Physician, Dentist, Mid-Level Provider, or Registered Nurse.
- Ordering Medical Diets - The Licensed healthcare provider will submit a medical diet order form to the kitchen staff. The medical diet order form must be signed by a Licensed Physician or a Registered Nurse.
- If the juvenile's medical needs require special handling of food, then those medical needs will be met accordingly.

### **Religious Belief Diets**

Religious belief diets are served to adhere to religious dietary laws.

- If a juvenile requests a special diet for religious beliefs the Case Manager will contact the juvenile's parents to obtain the dietary needs in writing from the juvenile's religious authority. The Case Manager will give a copy of the dietary needs to the Assistant Director of the CORE/Detention.
- After receiving the juvenile's dietary needs in writing the Assistant Director of the CORE/Detention may sign the Religious Diet Order form and submit said form to the kitchen staff. A copy will be given to the medical staff to be kept in the juvenile's medical chart.

## **Food**

All food served in our facility will meet, at a minimum, nutrition requirements established by the National School Lunch, Breakfast and Afterschool Care Programs, local and state guidelines, and federal statutes and regulations, and reviewed by our contract food service provider's dietitian.

Williamson County Juvenile Services' food contract provider will adhere to the process approach to HACCP Principles. Williamson County Juvenile Services' Food Safety Plan includes Standard Operating Procedures that apply the HACCP Principles. The Food Safety Plan utilizes Record Keeping Logs that document critical control points during food production and service, temperature controls, safety and sanitation checkpoints, a daily food safety checklist, corrective actions, employee food safety training records and a manager's yearly review.

## **Beverages**

Allowed: milk or milk alternatives, water, fruit juices and iced tea (as defined by USDA). Kool-Aid or similar drinks fruit flavored will only be served at supper time.

Not allowed for breakfast or lunch: soft drinks containing caloric sweeteners; sports drinks, fruit based drinks that contain less than 50% real fruit juice or that contain additional caloric sweeteners; beverages containing caffeine, excluding low-fat or fat-free chocolate milk (which contain trivial amounts of caffeine).

## **Snacks**

The snacks served after school and in the evening will make a positive contribution to the juvenile's diet and health. Williamson County Juvenile Services food service provider will serve the afternoon snack and evening snack based on timing of facility meals, juvenile's nutritional need, and other considerations.

## **Food Rewards or Punishment**

Williamson County Juvenile Services staff or the food contract provider will not use foods or beverages, especially those that do not meet the nutrition standards for foods and beverages, as rewards for academic performance and will not withhold food or beverages (including food served through school meals) as punishment.

Williamson County Juvenile Services will adhere to the National School Breakfast, Lunch and Afterschool Care Program guidelines. The exception will be during special outings, special celebrations, Thanksgiving and Christmas Holidays.

### **III. Anaphylaxis Awareness and Food Allergy Plan**

In accordance with the guidelines set forth by the Texas Department of State Health Services

(DSHS) to implement Senate Bill 27 (82<sup>nd</sup> Legislative Session) Williamson County Juvenile Services acknowledges the increasing prevalence of food and other allergies that leave children at risk for Anaphylaxis.

As part of our Wellness program, Williamson County Juvenile Service has identified the key elements fundamental in the development of a food allergy plan which are to be implemented within its wellness program.

1. Identification of Students with Food Allergies at-risk for Anaphylaxis.
2. Development, Communication, Implementation and Monitoring of Food Allergy Action Plans, Emergency Care Plans, Individualized Health Care Plans and/or 504 plans.
3. Reducing Risk of Exposure within the school setting.
4. Training for School Staff on recognition of Anaphylaxis and appropriate emergency response.
5. Post Anaphylaxis Reaction-Review of Policy and Procedures.

## **IV. Nutrition and Physical Activity Promotion and Food Marketing**

### **Nutrition Education and Promotion**

Williamson County Juvenile Services and J.J.A.E.P. will aim to teach, encourage, and support healthy eating by juveniles. Williamson County Juvenile Services will provide nutrition education and engage in nutrition promotion that:

- Is offered at each grade level as part of a sequential, comprehensive, standard-based program designed to provide juveniles with the knowledge and skills necessary to promote and protect their health;
- Promotes fruits, vegetables, whole grain products, low-fat and fat free dairy products, healthy food preparation methods, and health enhancing nutrition practices;
- Emphasizes calorie balance between food intake and energy expenditure (physical activity and exercise);
- Includes training for facilitators and assigned staff.

JJAEP, Core and Detention receives JJAEP nutrition and health instruction as part of science, health and PE instruction which includes topics such as:

- Analyzing the diet, reading nutrition labels, some basic cooking, overall wellness and knowledge on healthy lifestyles and importance of exercise, fitness testing, developing a personal fitness program and more.
- Snack Curriculum includes nutrition topics
- Skillpoint Vocation Program includes Culinary Arts

## **Integrating Physical Activity into the Classroom Setting**

For juveniles to receive the nationally - recommended amount of daily physical activity (i.e., at least 60 minutes per day) and for juveniles to fully embrace regular physical activity as a personal behavior, juveniles need opportunities for physical activity beyond physical education class. Toward that end:

- Health education will complement physical education by reinforcing the knowledge and self-management skills needed to maintain a physically-active lifestyle and to reduce time spent on sedentary activities, such as watching television;
- Opportunities for physical activity will be incorporated into other subject lessons;
- Classroom teachers will provide short physical activity breaks between lessons or classes, as appropriate.

## **Communications with Parents**

Parents are encouraged to communicate and provide feedback regarding wellness at the CORE and J.J.A.E.P. through contact with their Case Manager.

## **Staff Wellness**

Williamson County Juvenile Services highly values the health and well-being of every staff member and provides ongoing wellness education, activities and policies that support personal efforts by staff to maintain a healthy lifestyle.

# **V. Physical Activity Opportunities and Physical Education**

## **Daily Physical Education**

All juveniles participating in Williamson County Juvenile Services programs including juveniles with disabilities, special health care needs, and in alternative educational settings will receive daily physical education.

J.J.A.E.P. students are involved in recreational activities throughout the school day, including physical training, drill and ceremony, P.E., gardening, and maintenance of farm animals.

Williamson County Juvenile Services will discourage extended periods (i.e., periods of two or more hours) of inactivity. When activities, such as mandatory school-wide testing make it necessary for juveniles to remain indoors for long periods of time, the J.J.A.E.P. will give juveniles periodic breaks during which they are encouraged to stand and be moderately active.

CORE students are involved in daily recreation, a daily fitness program, 2 Go Program activities a year, as well as participating in the ropes course, and team sports with church groups.

DETENTION – students participate in Field Day events, True North Program with physical activities, weekly counseling groups with physical activities, and volleyball and basketball tournaments.

### **Physical Activity Opportunities Before and After School**

Williamson County Juvenile Services offers a range of activities that meet the needs, interests, and abilities of all juveniles, including boys, girls, juveniles with disabilities, and juveniles with special health-care needs.

J.J.A.E.P. students who remain after school are involved in recreational activities including physical training, ropes course and sports.

## **VI. Monitoring and Policy Review**

### **Monitoring**

To help with the initial development of the Departments wellness policies regarding CORE residents, Detention residents and J.J.A.E.P. students, each facility will conduct a baseline assessment of the departments existing nutrition and physical activity environments and policies. The results of those facility-by-facility assessments will be compiled at the department level to identify and prioritize needs.

### **Policy Review**

Assessments will be repeated every three years to help review policy compliance, assess progress, and determine areas in need of improvement. As part of that review, the department will review their nutrition and physical activity policies. The department will, as necessary, revise the wellness policies and develop work plans to facilitate their implementation.

The Wellness team consists of Nancy Chisum, Denise Carlson, Michael Pena, Kurt Hundl, Bob Fischer, Dee Martin and John Pelczar.