

# Facility Food Service Safety Sanitation Evaluation Report

**For use in facilities exempt from licensing and  
participating on the Oregon Department of Education's  
Child and Adult Care Food Program**

Date of Inspection	_____
Date of Re-Inspection	_____
Date of Re-Inspection	_____
Type of Facility:	
___ Child Care Center	___ Emergency Shelter
___ After School Care	___ Head Start
___ Adult Day Care Center	

Facility Name	_____
Facility Address	_____
Facility Contact	_____ Telephone Number _____

- At the time of this evaluation, this facility was found to be:**
- Satisfactory - No critical violation noted
  - Satisfactory - Subject to correction of cited critical violations within a specified time and use of an approved temporary alternative procedure
  - Unsatisfactory - critical violations cited and uncorrected

	Satisfactory	Unsatisfactory	Not Observed	N/A
Food obtained from approved sources	_____	_____	_____	_____
Potentially hazardous foods stored/prepared/held/served at the proper temperatures	_____	_____	_____	_____
Leftovers properly cooled	_____	_____	_____	_____
Dishwashing facilities adequate for washing rinsing and sanitizing	_____	_____	_____	_____
Hand washing sinks available in the food service area and supplied with hand soap and paper hand towels	_____	_____	_____	_____
Personal Hygiene practices	_____	_____	_____	_____
Other sanitation issues including a safe water source vector controls, chemical storage, refuse disposal and sewage disposal.	_____	_____	_____	_____
Kitchen/food prep area sanitary	_____	_____	_____	_____

Comments:

Facility representative _____	Inspector _____	Date _____
Facility representative _____	Inspector _____	Date _____
Facility representative _____	Inspector _____	Date _____

To contact the Oregon Department of Education, please email [ode.communitynutrition@ode.oregon.gov](mailto:ode.communitynutrition@ode.oregon.gov)