

MID DAY MEAL SCHEME -- INSPECTION REPORT BY INSPECTING OFFICERS

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* Required

Email
address *

Your email

Name of the Officer
visited *

Your answer

Designation *

☐ DYEO

☐ MEO

DIVISION /
MANDAL *

Choose ▼

Name Address of the School
visited *

Your answer

Data of
visit *

MM DD YYYY

___ / ___ / 2018

Name of the Agency/NGO serving MDM in the
school *

Your answer

No. of students
Enrolled *

Your answer

MDM
Opted *

Your answer

Actual MDM
taken *

Your answer

The time of cooking If NGO is serving the MDM,
the time of delivery of food should also be
mentioned. *

Your answer

No. Cook Cum Helpers working in the school *

Your answer

Whether separate prescribed and updated registers are being maintained for MDM scheme *

☐ YES

☐ NO

Whether Menu and food norms are painted on the walls of the school *

☐ YES

☐ NO

Whether Clean Drinking Water facility is available *

☐ YES

☐ NO

Whether pulses and vegetables are fresh or not *

☐ YES

☐ NO

Whether sac rice are being used or not. *

- ☐ YES
- ☐ NO

Whether eggs are being served five times a week or not *

- ☐ YES
- ☐ NO

Whether hygienic conditions are maintained in storage of pace of storage should also be mentioned. *

- ☐ YES
- ☐ NO

Whether iodised/double fortified salt is being used or not *

- ☐ YES
- ☐ NO

Whether hot cooked food is being served or not *

- ☐ YES
- ☐ NO

Whether Headmaster / Teacher incharge (on rotation basis) is tasting the food before serving children *

☐ YES

☐ NO

Whether kitchen shed is allotted to the school? *

☐ YES

☐ NO

If not allotted, the reasons may be mentioned and the place of cooking may be mentioned. *

Your answer

If allotted, the agency identified for construction of kitchen shed may be mentioned. Stage of kitchen shed may also be mentioned:

[ADD FILE](#)

Stage of kitchen shed may also be mentioned: a. Fully completed b. Partly completed i.e., Basement level, Lintel level *

☐ Fully Completed

☐ Partilally compelted

Whether SMC/VOs are supervising and discussing the scheme or not *

☐ Yes

☐ NO

How many meetings (SMC/VOs} conducted?
Specific remarks/recommendations of the committee / Organisation. *

Your answer

Whether any untoward incident occurred in the school. If so, the details of incident and the action taken may be mentioned. *

Your answer

Whether the students are properly washing their hands and plates before and after MDM *

☐ YES

☐ NO

Whether the students are properly washing their hands and plates before and after MDM *

☐ YES

☐ NO

Whether the children eating the MDM by sitting or through buffet (standing) *

- ☐ Sitting (Cooks/Helpers are serving the food to the children sitting in a row)
- ☐ Buffet (Children are collecting the food from by standing in a queue)

Frequency of inspections of common Kitchen Sheds of NGOs Mention the observations made during visit.

Your answer

Pl. Update photos of Children taking MDM, Kitchenshed, Kitchen garden etc.

[ADD FILE](#)

Specific observations/remarks of the inspecting officer on the MDM programme.