



Infant Feeding Plan

Child's Name: _____

Date of Birth: _____

EHS Center: _____

Caregiver: _____

Recommended Age	Food	Frequency
6 Weeks – 5 Months Child's AGE: _____	<input type="checkbox"/> Formula • Brand/Type: <input type="checkbox"/> Breast Milk	Every _____ hours. First feeding at ____:____AM
6 – 11 Months Child's AGE: _____	<input type="checkbox"/> Formula • Brand/Type: <input type="checkbox"/> Breast Milk	Every _____ hours. First feeding at ____:____AM
	<input type="checkbox"/> Infant Cereal <input type="checkbox"/> Baby Food ▪ <input type="checkbox"/> Fruits ▪ <input type="checkbox"/> Vegetables <input type="checkbox"/> Solid/Table Foods	Feeding times/ages to start food items: Cereal: _____ Baby Foods: _____ Snacks: _____
USDA and CHILD & ADULT CARE FOOD PROGRAM Recommendations		
	0 – 5 Months	6 – 11 Months
Breakfast	4-6 fl oz. breastmilk or formula	4-6 fl oz. breastmilk or formula
Lunch or Supper	4-6 fl oz. breastmilk or formula	0-4 tbsp infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz cheese; or 0-4 oz (volume) cottage cheese; or 0-4 oz yogurt; or a combination – Required when infant is developmentally ready.
Snack	4-6 fl oz. breastmilk or formula	2-4 fl oz breastmilk or formula 0-1/2 bread slice; or 0-2 crackers; or 0-4 tbsp infant cereal or ready-to-eat cereal – Required when infant is developmentally ready. 0-2 tbsp vegetable, fruit or both – Required when infant is developmentally ready.

Kids Central, Inc. will provide bottles for infants. Baby food provided by this facility will be in compliance with the infant meal pattern as required by Child & Adult Care Food Program.

Parent Signature

Date