**Fluid Milk Substitute Worksheet**

Contracting Entities (CEs) must notify the Texas Department of Agriculture (TDA) of their intention to serve a milk substitute must complete this worksheet and email it as an attachment to [squaremeals@TexasAgriculture.gov](mailto:squaremeals@TexasAgriculture.gov).

**Measurement Abbreviations**

* g = grams
* mg = milligrams
* mcg = micrograms
* U = international units

The Daily Values (DV) are the standard values developed by the Food and Drug Administration (FDA) for use on food values. The values are based on 2000 kcalories a day for adults and children over 4 years old.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Part I, Contracting Entity (CE) Information** | | | | | | | | | |
| Contracting Entity (CE) Name: | | |  | | | CE Identification Number (CEID): | |  | |
| Name of Person Submitting Form: | | |  | | | Date: | |  | |
| Telephone Number: | | |  | | | Email Address: | |  | |
| **Part II, Product Information** | | | | | | | | | |
| Product Name & Manufacturer: | | |  | | | | | | |
|  | | | | | | | | | |
| Nutrient | **(2)**  **Labels May Report the Daily Value (DV) Amount of the Named Nutrient in the Product by Different Methods** | | | | **(3)**  **Amount Listed on the Product Label** | | **(4)**  **Comparison to Minimum Amount** | | |
| **Required Minimum DV Amount Per 8 Fluid Ounces** | | | |
| **Current FDA[[1]](#footnote-1) DV Amount by Weight** | **Older FDA DV Amount by Weight** | | **Percentage[[2]](#footnote-2) of DV in the Product** |
| **Equal to or Greater Than** | | **Less Than** |
| Calcium | 276 mg | 276 mg | | 30% |  | |  | |  |
| Protein | 8 g | 8 g | | — |  | |  | |  |
| Vitamin A | 150 mcg | 500 IU | | 10% |  | |  | |  |
| Vitamin D | 2.5 mcg | 100 IU | | 25% |  | |  | |  |
| Magnesium | 24 mg | 24 mg | | 6% |  | |  | |  |
| Phosphorus | 222 mg | 222 mg | | 20% |  | |  | |  |
| Potassium | 349 mg | 349 mg | | 10% |  | |  | |  |
| Riboflavin | 0.44 mg | 0.44 mg | | 25% |  | |  | |  |
| Vitamin B-12 | 1.1 mcg | 1.1 mcg | | 20% |  | |  | |  |
|  | | | | | | | | | |
| **Part III, Determination If Product Meets the Requirements for a Milk Substitute** | | | | | | | | | |
| Does product meet the minimum nutrient requirements for a milk substitute?  □ Yes, if the checks recorded in Column 5 indicate that all of the listed product nutrients are equal to or greater than the minimum amount recorded in Column 3.  □ No, if any check in Column 5 indicates that any one of the product nutrients are less than the minimum amount recorded in Column 3. | | | | | | | | | |
|  | | | | | | | | | |
| Fat content of fluid milk substitutions, such as soy milk are **not** subject to the regulations regarding fat content that apply to regular fluid milk. Therefore, fluid milk substitutions **can** have a higher fat content than fat free or 1%. | | | | | | | | | |

**Directions: Fluid Milk Substitute Worksheet**

**Purpose**

This worksheet must be submitted by CEs that are notifying TDA of their intention to serve a milk substitute.

**How to Use this Worksheet**

|  |  |
| --- | --- |
| **Use of This Form** | |
| **Frequency** | As needed. |
| **Required Form Format** | Use this form to notify TDA that a milk substitute will be served. |
| **Record Retention** | Public and charter schools are required to keep documentation related to SNPs for five years.  Private schools, other nonprofit organizations, and residential child care institutions (RCCIs) are required to keep documentation for three years. |

Complete the worksheet and submit the worksheet as an attachment to the Texas Department of Agriculture (TDA) using the following email address: [squaremeals@TexasAgriculture.gov](mailto:squaremeals@TexasAgriculture.gov). Be sure to retain all documentation that demonstrates compliance with the milk substitute requirements.

**Directions**

**Part I, Contracting Entity (CE) Information**

* **Contracting Entity (CE) Name:** Record the name of the CE in the designated space.
* **CE Identification Number (CE ID):** Record the CE ID in the designated space.
* **Name of Person Submitting Form:** Record the name of the person submitting and certifying the accuracy of the information provided in the form in the designated space.
* **Date:** Record the date the form is completed in the designated space.
* **Telephone Number:** Record the phone number for the person submitting the form in the designated space.
* **Email Address:** Record the email address for the person submitting the form in the designated space.

**Part II, Product Information**

* Record the product name and the manufacturer in the designated space.
* Record the DV reported on the product label in Column 3 for each nutrient listed in Column 1.

[NOTE: FDA has recently changed the method of measurement for DVs. However, as product labeling transitions to the new FDA standards, products may be labeled in either current method or the older method. The information provided in Column 2 will help in identifying the correct amount of DV for the product.]

* Compare the amounts listed in Column 4 to the weight or percentage listed in Column 3.
* Record a check under the correct description in Column 4 to indicate if the amount in Column 3 is

*equal to or greater than* ***or*** *less than* the amount recorded in Column 2 for each nutrient listed in Column 1.

Part III, Determination If Product Meets the Requirements for a Milk Substitute

* Determine if the product meets the requirements for a milk substitute by reading the statement and checking the box with the accurate description based on the responses recorded in Column 4.

|  |  |  |
| --- | --- | --- |
| Yes, if all checks recorded in Column 4 indicate that all of the listed product nutrients are equal to or greater than the minimum amount recorded in Column 2. | 🠦 | The product may be served as a milk substitute. |
| No, if any check in Column 4 indicates that the any one of the product nutrients are less than the minimum amount recorded in Column 2. | 🠦 | The product cannot be served as a milk substitute. |

1. Additional information on the current FDA labeling requirements is available at [*https://www.fda.gov/food/food-labeling-nutrition/changes-nutrition-facts-label*](https://www.fda.gov/food/food-labeling-nutrition/changes-nutrition-facts-label) [↑](#footnote-ref-1)
2. Labeling regulations require that amounts be reported to the nearest 5%, i.e., the actual percentage of calcium is 27.6%, but regulations require that this amount be reported as 30%. [↑](#footnote-ref-2)