



Integrated Child Development Services



Supplementary Food Distribution

	Name	Code
District		
ICDS Project (Block)		
Sector		
Village/Ward		
Anganwadi Centre		
Anganwadi Worker		
Anganwadi Helper		



Ministry of Women & Child Development
Government of India

Section 3a : Supplementary Feeding Record for Girls - 3 years to 6 years old

(Include here all girls of ages 3 years to 5 years and 11 months; exclude girls who have completed 6 years)

Reporting month/year:.....20.....

1 Sl. No.	2 Sl. No. of family	3 Sl. No. within family	4 Name	5 Age		6 Nutritional Grade in previous month	7 Category			8 Whether minority in the state (Y/N)	9 Disabled (Y/N)	10 Total no. of days suppl. food received in the month	
				Yrs	Mons		ST	SC	Oth				
Total no. of girls absent throughout the month:			Sum of girls given supplementary food daily										Total
			a. Number of girls marked "N" daily										Total
			b. Number of girls marked "L" daily										Total
			Number of girls given supplementary food for 21+ days (count) :		ST	SC	Other	Minority	Disabled				

11 Dates																														
Record the amount of rations given each day (Mark "N" for normal quantity, mark "L" for larger quantity, such as for severely underweight children, mark "0" if not given. If THR is given, mark number of days for which given, along with "N" or "L"- for instance, "L/14" if larger quantity given for 14 days. Then, tick-mark (✓) the cells for the period for which it was given)																														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Section 3b : Supplementary Feeding Record for Boys - 3 years to 6 years old

(Include here all boys of ages 3 years to 5 years and 11 months; exclude boys who have completed 6 years)

1 Sl. No.	2 Sl. No. of family	3 Sl. No. within family	4 Name	5 Age		6 Nutritional Grade in previous month	7 Category			8 Whether minority in the state (Y/N)	9 Disabled (Y/N)	10 Total no. of days suppl. food received in the month
				Yrs	Mons		ST	SC	Oth			
				Total no. of boys absent throughout the month:			Sum of boys given supplementary food daily					
			a. Number of boys marked "N" daily									Total
			b. Number of boys marked "L" daily									Total
			Number of boys given supplementary food for 21+ days (count) :		ST	SC	Other	Minority	Disabled			

Reporting month/year:.....20.....

11 Dates																														
Record the amount of rations given each day (Mark "N" for normal quantity, mark "L" for larger quantity, such as for severely underweight children, mark "O" if not given. If THR is given, mark number of days for which given, along with "N" or "L"- for instance, "L/14" if larger quantity given for 14 days. Then, tick-mark (✓) the cells for the period for which it was given)																														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31



