



## *School Nutrition Technology System Guide*

### **Introduction**

Welcome to the North Carolina Department of Public Education user manual for the Online Agreement. The School Nutrition Technology System is an online application and claiming system for School Nutrition Programs. This web-based software provides Nutrition Consultants, state users ----and School Food Authorities with efficient and immediate access to applications, claims and related nutrition program functions.

School Food Authorities (SFAs) will annually, and as needed throughout the year make adjustments and additions to the application packet in the School Nutrition Technology System (SNTS) and submit to their School Nutrition Service Area Consultant for approval.

### **Application Guide**

The guide is intended for use by authorized sponsors of the U.S. Department of Agriculture (USDA) School Nutrition programs. It is designed to provide a general understanding of how to use the SNTS.

The guide provides:

- An explanation of each feature available;
- Screen captures of site pages and forms;
- Instructions for utilizing the site features; and
- Notes and comments to assist the user

## Guide Index

<b><u>Topic</u></b>	<b><u>Page(s)</u></b>
• Application Renewal	Page 3
• Items to mail to State Agency	Page 7
• Completing Application Packet in the School Nutrition Technology System (SNTS)	Page 7
• SFA Application	Page 8
• Catering Contracts and Catering Agreement	Page 16
• PLE Waiver	Page 17
• Severe Need Lunch	Page 19
• Community Eligibility Provision (CEP)	Page 20
• Meal Pattern Compliance	Page 22
• Checklist Summary	Page 22
• Site Application	Page 24
• Site Application Summary	Page 33
• After School Snack Program (ASSP)	Page 34
• Seamless Summer Program (SSO)	Page 39

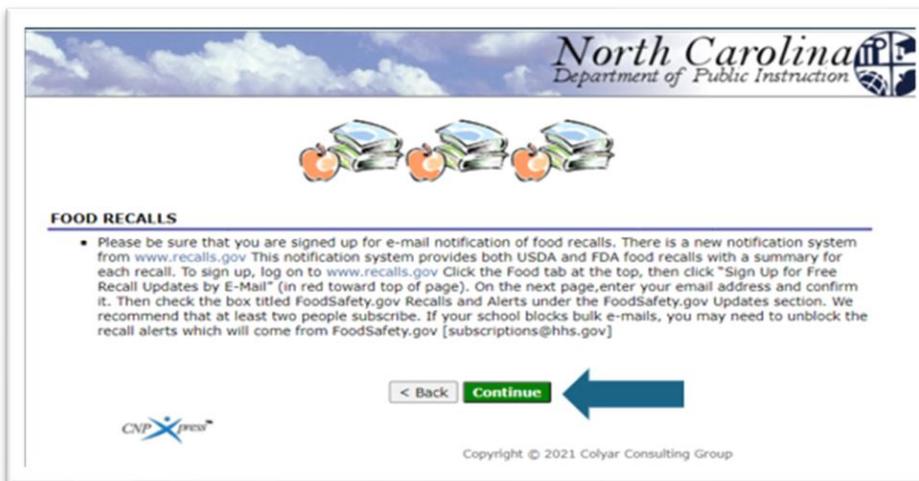
## Yearly Application Renewal Instructions for SFAs

**Step 1:** Access the SNTS from any computer connected to the Internet. Click on an internet browser and enter the URL <https://schoolnutrition.dpi.nc.gov/snp/NcidLogin.aspx>

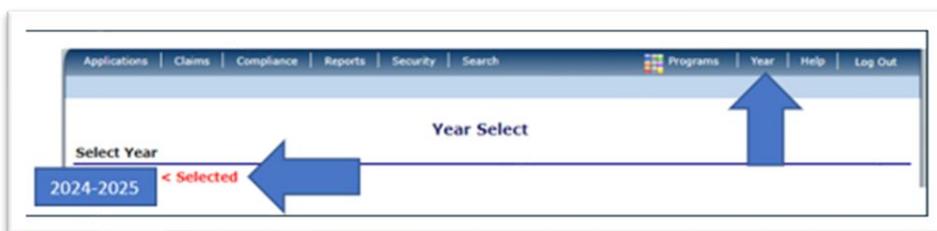
**Step 2:** Enter NCID User Name and Password and click “Login”. If an error message is received, contact NCID administrator at the local level or go to NCID.NC.gov to reset password.



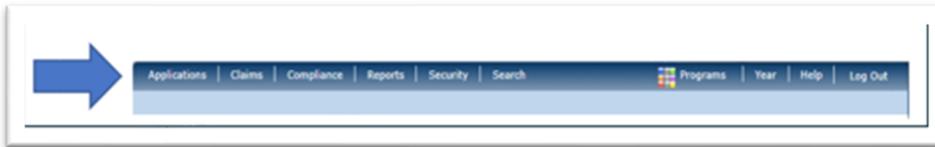
**Step 3:** Click on green “Continue



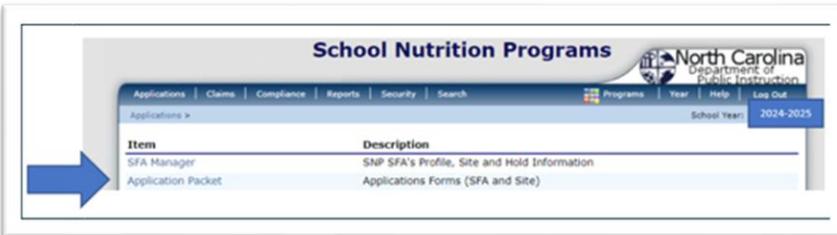
**Step 4:** Verify the current year is selected.



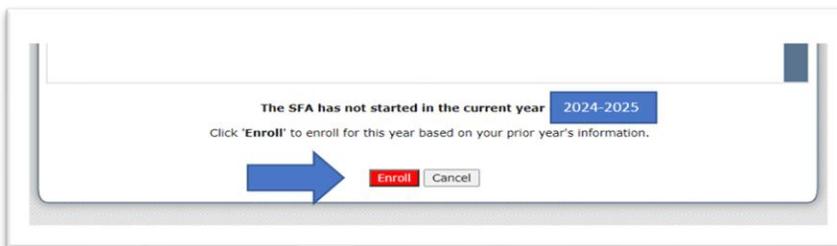
**Step 5:** Select “Applications” tab



**Step 6:** Select “Application Packet”



**Step 7:** Select “Enroll”



**Step 8:** Complete the applications for all sites that will be active for the current school year. Click on School Nutrition Program. Refer to blue arrow.

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	3	0	0	0	0	3

Select “Modify”

All sites that were approved for the current year will appear on the screen. ONLY select those that will be participating in the current year.

If the site is now inactive, contact the Service Area Consultant, so that the site may be removed. Do not complete the site application.

**Step 9:** Complete the SFA application

Action	Site ID / Site Name	NSLP	SBP	ASSP	SMP	FFVP	Version/ Status	Snack Elig.%
All: <input type="checkbox"/>		Totals		5	5	3	0	0
View   Modify Admin	<input type="checkbox"/> 300 Test Elementary School	X	X				Original / Error (36)	0.0000

Select save at the bottom of each site application once the changes are made.



## Community Eligibility Provision

If the SFA is participating in the Community Eligibility Provision, the CEP Schedule must be completed. The item to complete will appear in the Application Packet beneath the SFA Application.

## Food Service Management Companies, Catering Contracts, Catering Agreements

If the SFA is operating under a Food Service Management Company (FSMC) or has a Catering Contract there will be an additional step to complete. The item to complete will appear in the Application Packet between the SFA Application and the Checklist Summary.

Action	Form Name
<a href="#">View</a>   <a href="#">Revise</a>	✔ SFA Application
<a href="#">View</a>   <a href="#">Admin</a>   <a href="#">Revise</a>	✔ Community Eligibility Provision (CEP) Schedule
<a href="#">Details</a>	✔ FSMC Contract List
<a href="#">Details</a>	✔ Meal Pattern Compliance Dashboard
<a href="#">Details</a>	✔ Checklist Summary (8)

Action	Form Name
<a href="#">View</a>   <a href="#">Revise</a>	✔ SFA Application
<a href="#">Details</a>	✔ Catering Contract List
<a href="#">Details</a>	✔ Meal Pattern Compliance Dashboard
<a href="#">Details</a>	✔ Checklist Summary (8)

**Step 10:** Complete the Checklist Summary. There are checklist items for the SFA and Site Application(s).

SNP Checklist Summary			
380 Status: Active <b>Graham County Schools</b> Graham County Schools 52 Moose Branch Rd. Robbinsville, NC 28771 Region: 1			
SFA	Total Items	Submitted Items	Approved Items
Graham County Schools	6	0	0
School Nutrition Programs Sites	Total Items	Submitted Items	Approved Items
Test Elementary School	0	0	0

To attach a document, select the “paper clip” and upload the document. The document would need to be completed and either scanned or saved on the

computer. Once document is attached, check Document Submitted to NCDPI box.

Required Forms/ Documents to send to NCDPI	Document Submitted to NCDPI
Three copies of agreement form signed in BLUE ink	 <input checked="" type="checkbox"/>
CEP Agreement	 <input checked="" type="checkbox"/>
Edit Check Worksheet	 <input checked="" type="checkbox"/>
Attestation of Compliance with Meal Pattern Requirements	 <input checked="" type="checkbox"/>
Verification Plan	 <input checked="" type="checkbox"/>
Written Cash Management Procedure	 <input checked="" type="checkbox"/>

**Checklist File Upload Detail**

---

**Checklist**

Program: School Nutrition Programs  
 Checklist Item: Three copies of agreement form signed in BLUE ink

---

**Upload Detail**

1. File To Upload:  No file chosen

2. Comment:

**Step 11:** Complete the prior year Food Safety Inspection information located in the Application tab. Select “Application” and “modify” to add information. Select Save once all information is completed.

**Step 11: Complete the 2024-2025 Food Safety Inspection located in the Application tab. Select “Application”.**

Applications | Claims | Compliance | Reports | Security | Search Programs | Year | Help | Log Out

Under Items, Select “Food Safety Inspections”.

Item	Description
SFA Manager	SNP SFA's Profile, Site and Hold Information
Application Packet	Applications Forms (SFA and Site)
Application Manager Dashboard	Application Management Tool
Meal Pattern Compliance Summary	Number of Menu Pattern Certifications by SFA Summary
Verification Report	Mandatory Annual Verification Report
Verification Summary	Mandatory Annual Verification Report (FNS-742) Summary
Food Safety Inspections	Number of Food Safety Inspections by Site

Action	School Year	Received Date	Status
	2024-2025		Not Started
View   Admin	2023-2024	6/22/24	Approved
View   Admin	2022-2023	9/14/23	Approved
View   Admin	2021-2022	10/18/22	Approved
View   Admin	2020-2021	10/16/21	Approved

Complete the Food Safety Inspection information for all sites that participated in the SY 2023-2024. Select “Modify”.

Select “Save” once all information is completed.

**Step 12:** Select “Submit for Approval: under the Application tab once all Site Applications, SFA Application, Checklist Summary and Food Safety Inspection have been completed. All items must be completed before the “Submit for Approval” button will appear in red.



## Items Mailed to the Raleigh Office

- 3 original SIGNATURE PAGES signed in BLUE INK.
- 2 original Attestation of Compliance with Meal Pattern Requirements.
- 2 original Community Eligibility Provision (CEP) Amendment (if applicable).
- Effective Date of Free or Reduced-Price School Meals Household Application Eligibility Determination (if applicable).
  - The free and reduced-priced meal application packet is **emailed** to a designated person in the Raleigh office. It is not mailed to the Raleigh Office.
  - Free and reduced-price meal application packet is not uploaded in the School Nutrition Technology System (SNTS).

## Completing the Application in the School Nutrition Technology System

To complete the application, a user must have Application Rights.

To view the Application Packet, sign into the School Nutrition Technology System (SNTS) and select the “Applications” tab, see blue arrow.



Select “Application Packet”, see green arrow.



Once you Select “Application Packet”, the following screen will appear.



The following information is part of the Application Packet-

- SFA Application;
- Community Eligibility Provision (CEP) Schedule (if applicable)
- Fresh Fruit and Vegetable Sponsor Application (if applicable)
- Meal Pattern Compliance Dashboard;
- Checklist Summary;
- Application Packet Notes;
- Attachment List;
- Site Applications- consisting of School Nutrition Program and Seamless Summer Option (if applicable). These two areas will be outlined in the following pages to assist staff with completing the School Food Authority site applications and if applicable the School Food Authority Seamless Summer Option application.

## SFA Application

From the Main Screen, Sponsors should select Modify to update the application. See blue arrow below. Select View to review the information without making any changes. Admin is reserved for use by State Agency staff. Refer to the arrows below.

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>   	SFA Application	<a href="#">Original</a>	Error
<a href="#">Details</a>	FSMC Contract List		4 Contracts
<a href="#">Details</a>	Meal Pattern Compliance Dashboard		Approved
<a href="#">Details</a>	Checklist Summary (4)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">Details</a>	Attachment List		

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Revise</a>	✔ SFA Application	<a href="#">Rev. 1</a>	Approved
<a href="#">View</a>   <a href="#">Admin</a>   <a href="#">Revise</a>	✔ Community Eligibility Provision (CEP) Schedule	<a href="#">Original</a>	Approved
<a href="#">View</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	✔ Fresh Fruit And Vegetable Sponsor Application		Approved
<a href="#">Details</a>	✔ Meal Pattern Compliance Dashboard		Approved
<a href="#">Details</a>	✔ Checklist Summary (8)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">Details</a>	Attachment List (3)		

## **SFA Type**

**Question 1** – The Type of Agency will automatically populate.

## **School Year Dates of Operation**

**Question 2** – List the actual dates the SFA will operate. Record July 1 through June 30.

## **LEA Superintendent or Charter Board Chair**

**Question 3** – Enter the Salutation (double check for accuracy), First Name and Last Name for the LEA Superintendent or Charter Board Chair.

**Question 4** – Enter the Email Address for the LEA Superintendent or Charter Board Chair.

**Question 5** – Enter the Phone Number, with Extension (if applicable) and Fax Number (if applicable) for the LEA Superintendent or Charter Board Chair.

**Question 6** – Enter the Title of the LEA Superintendent or Charter Board Chair.

## **School Nutrition Street Address**

**Question 7** – (Address Line 1) – Enter the Street Address for the School Nutrition Central Office. (Address Line 2) – Use this line if additional address information is needed.

**Question 8** – Enter the City for the street address.

**Question 9** – The State of NC automatically populates. Enter the Zip Code for the street address.

**Question 10** – Enter the County for the street address.

## **School Nutrition Mailing Address**

If the School Nutrition Mailing Address is the same as the School Nutrition Street Address, a box is visible (under the Modify option) for the person completing the application to check and the School Nutrition Mailing Address will be listed in the School Nutrition Street Address. If not, then complete Questions 11-13.

**Question 11** – (Address Line 1) – Enter the Mailing Address for the School Nutrition Central Office. (Address Line 2) – Use this line if additional address information is needed.

**Question 12** – Enter the City for the Mailing Address.

**Question 13** – The State of NC automatically populates. Enter the Zip Code for the mailing address

The screenshot shows a form titled "SFA Type" with the following sections:

- SFA Type**
  - 1. Type of Agency:
- School Year Dates of Operation**
  - 2. Operational Dates: Start Date: 7/1/2024, End Date: 6/30/2025
- LEA Superintendent**
  - 3. Name: (Salutation, First Name, Last Name)
  - 4. Email Address:
  - 5. Phone: (Ext., Fax:)
  - 6. Title:
- School Nutrition Street Address**
  - 7. Address Line 1:
  - Address Line 2:
  - 8. City:
  - 9. State: NC, Zip:
  - 10. County:
- School Nutrition Mailing Address**
  - Same as the Street Address
  - 11. Address Line 1:
  - Address Line 2:
  - 12. City:
  - 13. State: NC, Zip:

**School Nutrition Administrator**

**Question 14** – Enter the Salutation, First Name and Last Name for the School Nutrition Administrator.

**Question 15** – Enter the Email Address for the School Nutrition Administrator.

**Question 16** – Enter the Phone Number, with Extension (if applicable) and Fax Number (if applicable) for the School Nutrition Administrator.

**Question 17** – Enter the Title of the School Nutrition Administrator.

The screenshot shows a form titled "School Nutrition Administrator" with the following fields:

- 14. Name: (Salutation, First Name, Last Name)
- 15. Email Address:
- 16. Phone: (Ext., Fax:)
- 17. Title:

**Reimbursement Claims Official**

The Reimbursement Claims Official cannot be the School Nutrition Administrator.

**Question 18** – Enter the Salutation, First Name and Last Name for the Reimbursement Claim Official.

**Question 19** – Enter the Email Address for the Reimbursement Claim Official.

**Question 20** – Enter the Phone Number, with Extension (if applicable) and Fax Number (if applicable) for the Reimbursement Claim Official.

**Question 21** – Enter the Title of the Reimbursement Claim Official. The Claims Official receives a notification of claims submitted. If the Claims Official changes, modification must be made in a timely manner in the application to receive important notifications.

Reimbursement Claims Official			
	Salutation	First Name	Last Name
18. Name:			
19. Email Address:			
20. Phone:		Ext:	Fax:
21. Title:			

### **Local Wellness Policy Responsible Party**

**Question 22** – Enter the Salutation, First Name and Last Name for the Local Wellness Policy Responsible Party.

**Question 23** – Enter the Email Address for the Local Wellness Policy Responsible Party.

**Question 24** – Enter the Phone Number, with Extension (if applicable) and Fax Number (if applicable) for the Local Wellness Policy Responsible Party.

**Question 25** – Enter the Title of the Local Wellness Policy Responsible Party.

Local Wellness Policy Responsible Party			
	Salutation	First Name	Last Name
22. Name:			
23. Email Address:			
24. Phone:		Ext:	Fax:
25. Title:			

### **Procurement / Code of Ethics**

**Question 26** – Enter “Yes” or “No”.

- If No and not using the NCDPI prototype, submit a copy of the document to the NCDPI Service Area Consultant for pre-approval. The SFAs procurement document must contain, at a minimum, everything in the NCDPI procurement plan template, plus any items added at the local level.
- Each School Food Authority on the National School Lunch Program/School Breakfast Program must have a Board Approved Procurement Plan.

**Question 27** – Enter “Yes”, “No” or “N/A”. Typically, most SFA’s expend over **\$90,000** and answer yes. View the most recent FC1-A to verify expenditures.

**Question 28** – Enter a dollar amount. The state threshold is **\$90,000**. SFA’s cannot go over **\$90,000** but can be more restrictive. This amount must match what is recorded in the Board Approved Procurement Plan.

**Question 29** – Enter a dollar amount. **\$10,000**. SFA’s can be more restrictive.

**Question 30** – Enter “Yes” or “No”. If “Yes” provide the name of the third party and describe the process. If “No” then proceed to the next question.

**Question 31** – Enter “Yes” or “No”. If “Yes” answer “Yes or “No” for ‘Did the SFA competitively procure the Group Purchasing Organization (GPO).’

The North Carolina Child Nutrition Procurement Alliance does not require competitive procurement.

**Procurement / Code of Ethics**

26. Will the prototype Procurement Plan provided by NCDPI be used?  Yes  No  
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.

27. Does the School Food Authority (SFA) expend or expect to expend a total of \$90,000 or more in School Nutrition Funds this year?  Yes  No  N/A

28. What is the SFA's Small Purchase Threshold?

29. What is the SFA's Fixed Asset Threshold?

30. Does the SFA use a third party to obtain rebates or other purchase incentives?  Yes  No  
If yes, please provide name and describe the process used:

31. Does the SFA use a Group Purchasing Organization (GPO) for any goods or services?  Yes  No  
If required, did the SFA competitively procure the GPO?  
(Note: NCCNPA does not require competitive procurement)  Yes  No

### **Civil Rights**

**Question 32** – Enter “Yes” or “No”. If “No”, a checklist item will be generated for the School Nutrition Area Consultant to approve. The prototype form can be found on the School Nutrition website.

**Question 33** – Enter “Yes” or “No”. If “No”, a checklist item will be generated for the School Nutrition Service Area Consultant to approve. The prototype form can be found on the School Nutrition website.

**Civil Rights**

32. Will the prototype Complaint of Discrimination form provided by the NCDPI be used?  Yes  No  
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.

33. Will the prototype Civil Rights Compliance Worksheet provided by the NCDPI be used?  Yes  No  
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.

## **Ethnicity / Racial Data**

**Question 34** – Enter Ethnicity makeup (must total 100%)

**Question 35** – Enter the Racial makeup (does not have to equal 100%)

<b>Ethnicity / Racial Data</b>	
34. Ethnicity makeup of this program's service area:	
Hispanic or Latino:	%
Not Hispanic or Latino:	%
35. Racial makeup of this program's service area:	
Asian:	%
American Indian or Alaska Native:	%
Black/African American:	%
White:	%
Native Hawaiian or Pacific Islander:	%

## **On-Site Reviews / Self-Assessment**

**Question 36** – Enter “Yes” or “No”. If “No”, a checklist item will be generated for the School Nutrition Area Consultant to approve. The prototype form can be found on the School Nutrition website.

**Question 37** – Enter “Yes”, “No”, or “N/A”. If “No”, a checklist item will be generated for the School Nutrition Area Consultant to approve. The prototype form can be found on the School Nutrition website.

<b>On-Site Reviews / Self Assessment</b>	
36. Will the prototype NSLP On-Site Review Form (Public School District only) or Self Assessment Form (Charter, Non-Public, RCCI only) provided by the NCDPI be used?	<input type="radio"/> Yes <input type="radio"/> No
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.	
37. Will the prototype After School Snack Program Review Form provided by the NCDPI be used?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.	

## **Direct Certification**

**Question 38** – Enter “Yes” or “No”. This answer should always be “Yes”. If answer is “No” the Sponsor must provide an explanation to the NCDPI Service Area Consultant. USDA requires a Direct Certification Match to be conducted at a minimum of three (3) times per year.

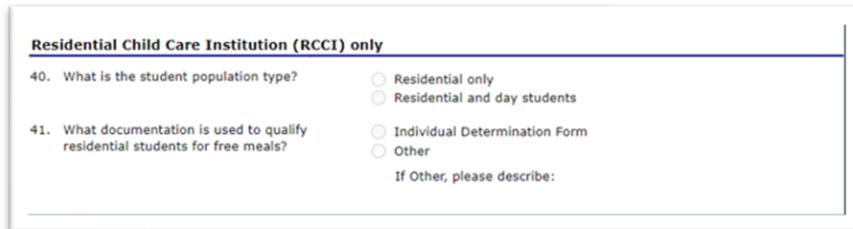
**Question 39** – Enter “Yes” or “No”. If “No”, submit a copy of the form to the NCDPI Program Analyst for approval prior to use.

<b>Direct Certification</b>	
38. Will the NCDPI's Direct Certification automated system be utilized in accordance with current USDA guidance?	<input type="radio"/> Yes <input type="radio"/> No
39. Will the prototype Notice of Direct Certification letter(s) provided by the NCDPI be used?	<input type="radio"/> Yes <input type="radio"/> No
If no, submit a copy of the form to the NCDPI Regional Consultant for approval prior to use.	

## **Residential Child Care Institution (RCCI) only**

**Question 40** – Select “Residential only” or “Residential and day students”

**Question 41** – Select “Individual Determination Form” or “Other” If Other, please describe what documentation was used to qualify residential students for free meals.



The image shows a screenshot of a survey form titled "Residential Child Care Institution (RCCI) only". It contains two questions, 40 and 41, each with radio button options. Question 40 asks for the student population type, with options "Residential only" and "Residential and day students". Question 41 asks for the documentation used to qualify residential students for free meals, with options "Individual Determination Form" and "Other". Below the "Other" option, there is a text field labeled "If Other, please describe:".

## **Eligibility/Verification Information**

**Question 42** – Enter “Yes” or “No” if participating in CEP. If Yes, enter “Yes” or “No” if district wide CEP.

**Question 43** – Enter “Yes” or “No”.

**Question 44** – Enter “Yes” or “No”. All meal applications, including the prototype, must be approved by the State Agency.

**Question 45** – Enter “Yes” or “No”. This question must be answered “Yes” and each SFA must use the current income eligibility guidelines.

**Question 46** – Enter “Yes” or “No”. The answer must be “Yes”, the State Agency releases a public release on behalf of all SFAs.

**Question 47** – Enter “Yes” or “No”. If “Yes,” enter the name of the software vendor.

**Question 48** – Enter “Yes” or “No”.

**Question 49** – Enter “Yes” or “No”. If “No”, the process for approving applications must be explained.

**Question 50** – Enter the First Name, Last Name, Title and Phone Number for the Determining Official. The Determining Official must be a School Nutrition Employee and not the same as the Hearing Official.

**Question 51** – Enter the First Name, Last Name, Title and Phone Number for the Hearing Official. The Hearing Official must be someone not involved in the School Nutrition application or verification processes, cannot be the SN administrator nor a FSMC employee.

**Question 52** – Enter “Yes”, “No” or “N/A”. Typically, the answer to this question is “Yes”.

**Question 53** – Enter “Yes”, “No” or “N/A”. Refer to the NCDPI Direct Certification SFA Manual for Direct Verification procedures.

**Question 54** – Enter the “Verification Method”. The Verification method will be sent to the SFAs by the School Nutrition Service Area Consultant in the Spring each year.

**Question 55** – Enter “Yes”, “No” or “N/A”. A copy of the SFA Verification Plan will be attached in the Checklist Summary.

**Question 56** – Enter the First Name, Last Name, Title and Phone Number for the Verification Official. The Verification Official must be a School Nutrition Employee and not the same as the Hearing Official. It cannot be a FSMC employee.

**Eligibility / Verification Information**

42. Will any of your sites be participating in the Community Eligibility Provision (CEP) for the National School Lunch Program?  Yes  No  
Are you District wide CEP?  Yes  No

43. Will the SFA offer a web-based application for the households to complete the Free and Reduced-Price Meal Application?  Yes  No

44. Will the prototype Free and Reduced Price School Meal Application and Verification Forms provided by the NCDPI be used? (This includes the Free and Reduced Price Meal application, Instruction page, Letter to Parent, Notification of Eligibility letter, Verification Selection Notification letter and Verification Change of Benefits letter.)  Yes  No

45. Will the most current Income Eligibility Guidelines be used for eligibility determination?  Yes  No

46. Will the prototype public release provided by the NCDPI be used?  Yes  No

47. Are Free and Reduced Price School Meal Applications approved using a computer software program?  
If yes, indicate the name of the software program (Vendor):

48. Does the SFA utilize a scanning method to process Free and Reduced Price School Meal applications?  Yes  No

49. Are all Free and Reduced Price School Meal Applications approved at the Central Office?  Yes  No  
If no, please explain:

50. List the Determining Official for Free and Reduced Price School Meal Benefits.  
NOTE: The Determining Official must be a SFA employee, not a Food Service Management Company (FSMC) employee, and must be different from the Hearing Official.  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

51. List the Hearing Official for Free and Reduced Price School Meal Benefits.  
NOTE: The Hearing Official may not be connected to the application or verification processes, may not be the CN Administrator and may not be a Food Service Management Company (FSMC) employee.  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

52. Is the Verification Process completed at the Central Office?  Yes  No  N/A

53. Will the NCDPI Direct Verification automated system be used?  Yes  No  N/A

54. Which Verification Method will be utilized?

55. Will the prototype Verification Plan provided by the NCDPI be used?  Yes  No  N/A

56. List the Verification Official for Free and Reduced Price School Meal Benefits.  
NOTE: The Verification Official must be a SFA employee, not a Food Service Management Company (FSMC) employee, and must be different from the Hearing Official.  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Food Service Management Company (FSMC)**

**Question 57** – Enter “Yes” or “No”. If “Yes”, answer questions **58-61**. If “No” proceed to Question 62.

**Question 58** – Enter the Salutation, First Name and Last Name for the Manager for the FSMC Contract.

**Question 59** – Enter the email address for the Manager for the FSMC Contract.

**Question 60** – Enter the Phone Number, with Extension (if applicable) and Fax Number (if applicable) for the Manager for the FSMC Contract.

**Question 61** – Enter the Title for the Manager for the FSMC Contract.

Food Service Management Company (FSMC)			
57. Will the school nutrition program be managed by a Food Service Management Company (FSMC)? <input type="radio"/> Yes <input type="radio"/> No			
SFA Contract Manager for the FSMC Contract			
	Salutation	First Name	Last Name
58. Name:			
59. Email Address:			
60. Phone:		Ext:	Fax:
61. Title:			

## Catering Contracts and Catering Agreements

The catering contract and agreement templates are given to the SFA by consultants, upon request.

The School Nutrition Procurement Specialist must review the catering contracts and catering agreements prior to final approval.

- The **catering contract** is used by SFAs bidding for catering services from a restaurant or catering establishment.
- The catering contract is reviewed by the School Nutrition Procurement Specialist prior to the SFA putting the document out to bid.
- Once a caterer is selected by the SFA, the catering contract is submitted again to the School Nutrition Procurement Specialist prior to being submitted to the Board for approval.
- In the original contract/agreement year, the catering contract is uploaded into the SNTS (the entire document) as part of the checklist summary. In subsequent allowable renewal years, a one-page amendment signed by both parties is uploaded if the SFA is going to renew the agreement/contract.

The catering agreement is reviewed by the School Nutrition Procurement Specialist prior to the SFAs having it Board approved.

- The **catering agreement (SFA to SFA)** is used when an LEA is catering to a charter school, private school or residential facility.
- It is reviewed by the School Nutrition Procurement Specialist prior to going to the Board for approval.
- In the original contract/agreement year, the catering agreement is uploaded into the SNTS (the entire document) as part of the checklist summary. In subsequent allowable renewal years, a one-page amendment signed by both parties is uploaded if the SFA is going to renew the agreement/contract.

**Question 62** – Enter “Yes” or “No”. If “**Yes**”, enter “Yes” or “No” answering did the School Nutrition Procurement Specialist approve the catering contract prior to signature of either party.

**Question 63** – Enter “Yes” or “No”. If “**Yes**”, provide the school system name and Answer “Yes” or “No” to “Did the NCDPI approve the catering agreement prior to signature of either party”?

**Question 64** – Enter “Yes” or “No”. If “**Yes**”, provide the Company Name, Contact Name and Contact Address.

**Catering Contracts**

62. Will the meals be purchased from a catering business?  Yes  No

NOTE: SFA must use the NCDPI's prototype School Nutrition Catering Contract.  
If yes, did the NCDPI approve the catering contract prior to signature of either party?  Yes  No

63. Will the meals be purchased from a school system?  Yes  No

NOTE: SFA must use the NCDPI's prototype Catering Contract between LEA and Charter.  
If yes, provide the name of the school system:  
If yes, did the NCDPI approve the catering contract prior to signature of either party?  Yes  No

64. Is the SFA operated by a business management company?  Yes  No

If yes, please provide the name of the company, name and address of the contact person.

Company Name:  
Contact Name:  
Contact Address:

**Edit Checks**

**Question 65** – Enter “Yes” or “No”. Answer ‘Yes’ if the SFA is using the State Agency edit-check prototype (manual edit checks). If the answer is “No” upload the edit check (generally from the SFA’s software system) to the Checklist Summary. Edit checks must be conducted based on the percentage calculation using Daily Attendance and Daily Membership.

**Question 66** – In the box provided, describe the SFA’s Back-Up meal counting procedure.

**Edit Checks**

65. Will the prototype Edit Check Worksheet provided by the NCDPI be used?  Yes  No  
If no, submit a copy of the worksheet to the NCDPI for approval prior to use.

66. What is the Back-Up Meal Counting procedure for the SFA?

**Financial**

**Question 67** – Enter “Yes”, “No” or “N/A”. If “No”, Enter “Yes”, “No” or “N/A”. If “No” or N/A, explain where funds are coming from to support Adult Meal Prices. See current Compliance Supplement for calculation details. If Adult meals are A la Carte select N/A.

**Question 68** – Enter “Yes”, “No” or “N/A”. If “Yes”, enter the amount of Tuition per year.

**Question 69** – Indirect Cost Rate will be entered by the State Agency.

**Question 70** – Enter “Yes” or “No”. If “No”, did the SFA request a PLE waiver Enter “Yes” or “No”. See SFA’s PLE tool.

**PLE Waiver**

If CEP, select No for first part of question 70. Select Yes for second part of question 70. Submit a PLE waiver on letterhead using the sample wording below.

<SCHOOL> will adhere to the terms of the (indicate current year) Appropriations Act indicating that any SFA with a positive or zero balance in its nonprofit school food service

account as of June 30, XXXX (indicate prior year), is exempt from paid lunch equity pricing requirements found at 7 CFR 210.14(e) for (indicate current year).

The USDA will be updating the PLE tool. It should be available in April 2025. SFAs will need to use the 2025-2026 tool and not prior versions.

Upload under Attachment List.

**Question 71** – Enter “Yes”, “No” or “N/A”. If the PLE tool verified a price increase and the SFA didn’t increase prices, did the SFA receive funds from a non-federal source to justify not having a price increase? See SFA’s PLE Tool Summary.

**Question 72** – Enter “Yes”, “No” or “N/A”. See PLE Tool Summary and/or A la Carte price list.

**Question 73** – Enter “Yes”, “No” or “N/A”. A detailed written cash management procedure must be uploaded to the Checklist Summary.

**Question 74** – Enter “Yes” or “No”. The response must be ‘Yes’. Each SFA must have an Equipment Disposition Plan in place. Reference 2CFR Part 200.313 (c).

Financial	
67. Is the SFA collecting sufficient revenue to cover the cost to produce and serve an adult meal?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
If no, is the SFA using local funds to support adult prices?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
If the SFA is not using local funds to support adult meal prices, please explain:	
68. Does the SFA charge tuition?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
If yes, amount per year:	
69. Indirect Cost Rate: 0.0000 %	
70. Did the SFA increase meal prices to comply with the Paid Lunch Equity (PLE) requirement?	<input type="radio"/> Yes <input type="radio"/> No
If no, did the SFA request a PLE waiver?	<input type="radio"/> Yes <input type="radio"/> No
71. Did the SFA receive sufficient non-federal source contributions in lieu of increasing meal prices and record the amount on the required financial form?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
72. Does the SFA generate sufficient revenue from the sale of non-reimbursable meal items to cover the cost of the food?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
73. Does the SFA have a detailed written cash management procedure?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
74. Does the SFA have an equipment disposition plan?	<input type="radio"/> Yes <input type="radio"/> No

### **Attendance Factor**

**Question 75** – Enter Attendance Factor. This should be a whole number and is derived from the most recent percentage of enrolled students in attendance daily on an average.

Attendance Factor
75. Attendance Factor:

### **At Risk Afterschool Meals Program (ARAMP)**

**Question 76** – Enter “Yes” or “No”. If “No”, answer “Yes” or “No” will the SFA apply for the program during the school year.

**At Risk Afterschool Meals Program (ARAMP)**

76. Is the SFA currently participating in the At-Risk Afterschool Meals Program offered through NC-DHHS CACFP?  Yes  No

If no, will the SFA apply for the program during the school year?  Yes  No

**Smart Snack**

**Question 77** – Select which option will be implemented at the SFA.

- Prior approval by the State Agency is required if the LEA chooses a combination of options (Option 5). Submit the request to the School Nutrition State Agency Director via email describing, in detail, the reason more than one option is necessary. Copy the Program Analyst and the School Nutrition Service Area Consultant. The SFA must upload the request under Attachment List.

**Smart Snack**

77. What option(s) will be implemented at the SFA?

Option 1

Option 2

Option 3

Option 4

Option 5

**Severe Need Lunch – Reimbursement Rate Determination**

The data for this is pulled annually from the SNTS from lunches claimed 2 years prior; it is based on the total free lunches plus the total reduced lunches divided by the total number of lunches served. If the % is over 60% the SFA will receive an additional \$.02 reimbursement for each meal served. The Severe Need Lunch is district wide. This will automatically populate.

**Severe Need Lunch - Reimbursement Rate Determination**

Lunches claimed for School Year (2018 - 2019)

Total Free Lunches	Total Reduced Price Lunches	Total Lunches	Free & Reduced %	Qualify for extra \$.02 reimbursement rate
			0%	No

**Certification**

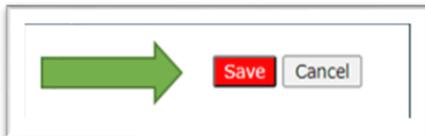
Read the statement and check both certification boxes attesting the information added to the site agreement is correct. The site application will show an error message if the boxes are not checked.

**Certification**

I certify that neither the SFA nor its personnel is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal department or agency.

The information on this SFA application is true and correct to the best of my knowledge. I understand this information is being given in connection with receipt of federal funds; Department officials may, for cause, verify information and the deliberate misrepresentation will subject me to prosecution under applicable federal and state criminal statutes. The SFA hereby agrees to comply with all state and federal laws and regulations, as well as policies of the State Board of Education, governing School Nutrition Programs. The SFA acknowledges that no reimbursement will be provided for any meal/snack service that has not received prior approval by the Department. I understand that federal or state officials may make announced and/or unannounced visits at any participating site to monitor compliance.

Save your information by selecting the red save Button, see green arrow below. An error message will appear if all questions are not answered. If you cancel, information will not be saved.



## Community Eligibility Provision (CEP)- Identified Student Percentages

- Enter the “Number of Identified Students” for each site.
- Enter your “Enrollment” ADM for each site.
- The ISP%, Eligible? And Potentially Eligible? will auto-generate.
- The “Number of Identified Students” and “Enrollment” ADM can be found on the SFA’s site data template worksheet found on the NCDPI website that is filled out with the SFA’s April 1 data.

**General Information**

Reporting Date:

Due Date:

**Instructions**

The Community Eligibility Provision (CEP) for the National School Lunch Program (NSLP) provides an alternative to household applications for free and reduced price meals for economically disadvantaged students in local educational agencies (LEAs) and schools. Sites that elect this option agree to serve all students free lunches and breakfasts for four (4) successive school years and claim the meals based on a percentage of Identified Students multiplied by a USDA-defined multiplier factor.

Sites which have an Identified Student Percentage (ISP) of 40% or greater are eligible for this option.  
Sites which have an Identified Student Percentage (ISP) between 30.00% - 39.99% are potentially eligible.

**Enter each Site's Number of Identified Students and Enrollment as of the Reporting Date.**

Site ID	Site Name	Nbr of Identified Students	Enrollment	ISP	Eligible?	Potentially Eligible?
289	Whitted School	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
304	Bethesda Elementary	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
306	Brogden Middle	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
308	Burton Elementary	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
309	J D Clement Early College HS	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
310	Eastway Elementary	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
312	C E Jordan High	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		
313	Easley Elementary	<input type="text" value="0"/>	<input type="text" value="0"/>	0.00 %		

The information below provides a snapshot of the chart once it is completed.

**General Information**

Reporting Date:

Due Date:

**Instructions**

The Community Eligibility Provision (CEP) for the National School Lunch Program (NSLP) provides an alternative to household applications for free and reduced price meals for economically disadvantaged students in local educational agencies (LEAs) and schools. Sites that elect this option agree to serve all students free lunches and breakfasts for four (4) successive school years and claim the meals based on a percentage of Identified Students multiplied by a USDA-defined multiplier factor.

Sites which have an Identified Student Percentage (ISP) of 40% or greater are eligible for this option. Sites which have an Identified Student Percentage (ISP) between 30.00% - 39.99% are potentially eligible.

Enter each Site's Number of Identified Students and Enrollment as of the Reporting Date.

**Select sites are eligible for CEP**

Site ID	Site Name	Nbr of Identified Students	Enrollment	ISP	Eligible?	Potentially Eligible?
289	Whitted School	0	120	0.00 %		
304	Bethesda Elementary	358	682	52.49 %	X	
306	Brogden Middle	276	523	52.77 %	X	
308	Burton Elementary	215	375	57.33 %	X	
309	J D Clement Early College HS	120	398	30.15 %		X
310	Eastway Elementary	372	559	66.55 %	X	
312	C E Jordan High	481	1,957	24.58 %		
313	Easley Elementary	94	512	18.36 %		
314	School for Creative Studies	191	641	29.80 %		
315	Eno Valley Elementary	336	551	60.98 %	X	
316	George L Carrington Middle	448	935	47.91 %	X	

The next step is to ensure that grouping of school sites is set up. Groups are selected in the Grouping Section. See blue arrow below.

Under each site the group will be selected from a drop down. See green arrow.

These groups will be consolidated by Group under the Summary Section. See orange arrows.

The Cycle Year is the first school year that the site is operating CEP. The Data Year is the April 1 prior to the first school year the site is operating CEP.

320 Status: Active  
 Durham Public Schools  
 1817 Hargett Rd.  
 Durham, NC 27704  
 Region: 4

**Summary** ← Mode: Auto

Group Name	Show Detail	Nbr of Sites	Cycle Year	Data Year	Nbr of Identified Students	Enrollment	ISP	Claim % Free	Claim % Paid
Unassigned	<input checked="" type="checkbox"/>	0			0	0			
Individual	<input checked="" type="checkbox"/>	0			0	0			
1	<input checked="" type="checkbox"/>	13	2017-2018	2016-2017	3,784	6,125	61.78	98.85	1.15
2	<input checked="" type="checkbox"/>	6	2019-2020	2018-2019	2,240	4,475	50.06	80.10	19.90

Group Count: 2

**Instructions**

The Community Eligibility Provision (CEP) for the National School Lunch Program (NSLP) provides an alternative to household applications for free and reduced price meals. Eligible Sites, or group of Sites, must meet the minimum Identified Student Percentage (ISP) of 40%. CEP can be elected for an individual Site, group of Sites (e.g., Group 1), or across the district. The information in the following table identifies all Site applications that have selected CEP, and the respective Site's identified student data. For each site, identify whether the site will qualify based on its individual numbers ("Individual") or as a group ("Group #").

**Grouping** ← Total Sites: 19

Site ID	Site Name	Group	Cycle Year	Data Year	Nbr of Identified Students	Enrollment	ISP	Claim % Free	Claim % Paid
304	Bethesda Elementary	1	2017-2018	2016-2017	363	700	51.86	82.98	17.02
306	Brogden Middle	2	2019-2020	2018-2019	276	523	52.77	84.43	15.57
308	Burton Elementary	1	2017-2018	2016-2017	207	373	55.50	88.80	11.20
310	Eastway Elementary	1	2017-2018	2016-2017	435	597	72.86	100.00	0.00
315	Eno Valley Elementary	1	2017-2018	2016-2017	363	581	62.48	99.97	0.03
320	Glenn Elementary	1	2017-2018	2016-2017	429	703	61.02	97.63	2.37

All SFA's must keep documentation of Community Eligibility (CEP) Information on file. This includes the first year of the program until the last year of the program. For example, if the SFA begins operating CEP in the 2017-2018 school year and it ends 2020-2021, all documents must be maintained. A best practice is to make a file by school year and keep the supporting documentation for the Identified Student Percentage (ISP) in a secure location.

## Meal Pattern Compliance Dashboard

**Annual Attestation** – This information will auto populate, reflecting the year that the SFA was certified as compliant with the meal pattern requirements set forth by the 2010 Healthy Hunger Free Kids Act (HHFKA).

**Months Certified** – A check mark will be entered by the State Agency for each month the SFA agrees to remain compliant with the all meal patterns and nutrition requirements as defined in the HHFKA.

**Meal Pattern Compliance Dashboard**  
For School Year: 2019 - 2020

Submitted Date:  
Original Submitted Date:  
Approved Date:  
Validated Date:

Region: 2

Action	Document Preparer Contact	Lunch Served	Breakfast Served	SFA Attestation	Date Last Updated	Status
<input checked="" type="checkbox"/>	[Redacted]	Yes	Yes		8/08/2014	Approved

Action	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020
<input checked="" type="checkbox"/>												

Note Count: 0

Action	Date	Created By	Note Summary
No data to display.			

[Add Note](#)

[Back](#)

## Checklist Summary

Select "Details" for Checklist Summary see Blue Arrow

**School Nutrition Programs**  
North Carolina Department of Public Instruction

640 Status: Active  
Nash-Rocky Mount Schools  
No address on file for this year  
Region: 6

Packet Submitted Date:  
Packet Approved Date:  
Packet Original Approval Date:  
Packet Status: Not Submitted

Packet Assigned To: Gwyn Roberson-Mcbride

Action	Form Name	Latest Version	Status
<a href="#">View   Modify   Admin</a>	SFA Application	Original	Error
<a href="#">Details</a>	<input checked="" type="checkbox"/> Meal Pattern Compliance Dashboard		Approved
<a href="#">Details</a> <span style="color: blue; font-weight: bold;">←</span>	<input checked="" type="checkbox"/> Checklist Summary (7)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/Closed	Error	Total Applications
School Nutrition Program	0	29	0	0	0	0	29

[Back](#) [Submit for Approval](#) [Approve](#) [Return](#) [Deny](#) [Withdraw Packet](#)

[Show Packet History](#)

Under SFA, if there is a number greater than zero listed under Total Items (green arrow), click on the SFA name (red arrow). Attachments should be added since the SFA name is highlighted in blue (a hyperlink).

Under School Nutrition Program Sites if there is a number greater than zero listed under Total Items (orange arrow), click on the school site name (yellow arrow) to add attachments.

In this example, the school site name is not highlighted and there is no hyperlink, which indicates no attachments are required in this section.

**School Nutrition Programs**  
North Carolina Department of Public Instruction

Applications | Claims | Compliance | Reports | Security | Search

Applications > Application Packet > Checklist Summary > School Year: [ ]

**SNP Checklist Summary**

640 Status: Active  
**Nash-Rocky Mount Schools**  
 1309 Nutrition Street  
 Rocky Mount, NC 27804  
 Region: 6

SFA	Total Items	Submitted Items	Approved Items
Nash-Rocky Mount Schools	7	0	0

School Nutrition Programs Sites	Total Items	Submitted Items	Approved Items
Bailey Elementary	0	0	0
Baskervill Elementary	0	0	0
Benvenue Elementary	0	0	0
Cedar Grove Elementary	0	0	0

To add attachments, click the turquoise paperclip . Only 1 copy of the agreement form signed in blue ink is uploaded.

640 Status: Active  
**Nash-Rocky Mount Schools**  
 1309 Nutrition Street  
 Rocky Mount, NC 27804  
 Region: 6

Required Forms/Documents to send to NCDPI	Document Submitted to NCDPI	Date Submitted to NCDPI	Document Submitted on File w/NCDPI	Status	Status Date	Last Updated By
Three copies of agreement form signed in BLUE ink	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires
Edit Check Worksheet	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires
Free and Reduced Price Meal Benefit Application and All Letters (includes verification, direct certification, etc.)	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires
Attestation of Compliance with Meal Pattern Requirements	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires
Submit a copy of the signature page to NCDPI for approval	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval		JeffSquires
Verification Plan	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires
Written Cash Management Procedure	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	Pending Approval	03/11/2022	JeffSquires

Once the paperclip is selected a box will open (see below for Upload Details).

- Check the 'Document Submitted to NCDPI' box after uploading attachments
- 'Date Submitted to NCDPI' will populate.
- The Free and Reduced-Price Meal Benefit Application and all letters are not uploaded.

- The 'Document Submitted to NCDPI will need to be checked. 'Date Submitted to NCDPI' will populate.

**File to Upload** - Select Choose File, see blue arrow. This will allow you to select the file for the required document that is saved on the SFA's computer.

**Comment** - In the comment box, see red arrow, a description of the contents in the file can be written (example: verification plan).

Select the red Save button, see green arrow. Repeat for all required forms/documents.

**School Nutrition Programs** North Carolina Department of Public Instruction

Applications > Application Packet >

VIEW | MODIFY | DELETE

### Checklist File Upload Detail

**Checklist**

Program: School Nutrition Programs  
 Checklist Item: Three copies of agreement form signed in BLUE ink

**Upload Detail**

1. File To Upload: Choose File No file chosen

2. Comment:

Save Cancel

VIEW | MODIFY | DELETE

## School Nutrition Program Site Application

To locate the School Nutrition Program sites, go under Site Applications at the bottom of the application packet to School Nutrition Program, see blue arrow below. Click on 'School Nutrition Program' to open the following screen - **Application Packet – SNP Site List**

Applications > Application Packet > School Year: 2022 - 2023

### 2022 - 2023 Application Packet

640 Status: Active  
**Nash-Rocky Mount Schools**  
 1309 Nutrition Street  
 Rocky Mount, NC 27804  
 Region: 6

School Year

Packet Submitted Date:  
 Packet Approved Date:  
 Packet Original Approval Date:  
 Packet Status: Not Submitted

Packet Assigned To: Gwyn Roberson-Mcbride

Action	Form Name	Latest Version	Status
View   Modify   Admin	SFA Application	Original	Error
Details	✓ Meal Pattern Compliance Dashboard		Approved
Details	➔ Checklist Summary (7)		
Details	Application Packet Notes		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	29	0	0	0	0	29

➔ Show Packet History

< Back Submit for Approval Approve Return Deny Withdraw Packet

## Action

Under the Action heading click on modify for the site to be completed.

**School Nutrition Programs** North Carolina Department of Public Instruction

Applications | Claims | Compliance | Reports | Security | Search

Applications > Application Packet > Packet Site List - SNP > School Year: [ ]

**Application Packet - SNP Site List**

640 Status: Active  
**Nash-Rocky Mount Schools**  
1309 Nutrition Street  
Rocky Mount, NC 27804  
Region: 6

Site Application Summary

Action	Site ID / Site Name	NSLP	SBP	ASSP	SMP	FFVP	Version/Status	Snack Elig.%
Select All: <input type="checkbox"/>		Totals	29	29	8	0	0	
<a href="#">View   Modify Admin</a>	<input type="checkbox"/> 302 Fairview Early Childhood Center	X	X	X			Original / Pending Validation	
<a href="#">View   Modify Admin</a>	<input type="checkbox"/> 304 Bailey Elementary	X	X				Original / Pending Validation	
<a href="#">View   Modify Admin</a>	<input type="checkbox"/> 306 Baskerville Elementary	X	X	X			Original / Pending Validation	
<a href="#">View   Modify Admin</a>	<input type="checkbox"/> 308 Benvenue Elementary	X	X				Original / Pending Validation	

## Program(s) Operating

To revise/add a new program, click 'Modify Program Selections' located at the top right (see orange arrow). Check the programs operated (see green arrow) and click save and continue.

Do not enroll in the Afterschool Snack Program (ASSP) until the first month of operation is known.

**Program(s) Operating** Modify Program Selection

A. National School Lunch Program (NSLP) CFDA #10.555  
 B. School Breakfast Program (SBP) CFDA #10.553  
 C. Afterschool Snack Program (ASSP) CFDA #10.555  
 D. Special Milk Program (SMP) CFDA #10.556

Check all that apply:

A. National School Lunch Program (NSLP) CFDA #10.555  
 B. School Breakfast Program (SBP) CFDA #10.553  
 C. Afterschool Snack Program (ASSP) CFDA #10.555  
 D. Special Milk Program (SMP) CFDA #10.556

< Back Save and Continue

**Program(s) Operating** Modify Program Selection

A. National School Lunch Program (NSLP) CFDA #10.555  
 B. School Breakfast Program (SBP) CFDA #10.553  
 C. Afterschool Snack Program (ASSP) CFDA #10.555  
 D. Special Milk Program (SMP) CFDA #10.556

## Street Address

**Questions 1 through 4** - This address and its accuracy is critical. Once approved, this is the physical location where children receive and consume meals.

**Question 1** - (Address Line 1) - Enter the Physical Address of the site.

(Address Line 2) – Use this line if additional address information is needed.

**Question 2** – Enter the City for the site.

**Question 3** – The State of NC automatically populates. Enter the Zip Code of this city.

**Question 4** – Select the County from the drop-down list.

The screenshot shows a form titled "Street Address" with a blue header line. Below the header, there are four numbered fields: 1. Address Line 1: (with a sub-label "Address Line 2:" below it), 2. City:, 3. State: (with "NC" pre-filled) and Zip:, and 4. County:.

**Site Contact for School Nutrition Program**

**Questions 5 through 8** must indicate the name of the Cafeteria Manager at the school site and give his/her contact information.

**Question 5** – Enter the Salutation, First Name and Last Name for the Site Contact employee at this site. Please make sure the salutation is correct.

**Question 6** – Enter the Email for the Site Contact listed in Question 5.

**Question 7** – Enter the Phone Number, with Extension (if applicable) and Fax number (if applicable) for the Site Contact in Question 5.

**Question 8** – Enter the Title of the Site Contact listed in Question 5.

The screenshot shows a form titled "Site Contact for School Nutrition Program" with a blue header line. Below the header, there are four numbered fields: 5. Name: (with sub-labels "Salutation", "First Name", and "Last Name" above it), 6. Email Address: (with an email icon), 7. Phone: (with sub-labels "Ext:" and "Fax:" above it), and 8. Title:.

**Participation Information**

**Question 9** – Enter Site type from the drop-down list. Traditional Public School, Charter School, Non-public School, or RCCI.

**Question 10** – Click the box after each grade claimed at this site.

**Participation Information**

9. Site Type:

10. Select Grades at this site: (Check all that apply)

Early Education:  1st grade:  5th grade:  9th grade:

Head Start:  2nd grade:  6th grade:  10th grade:

Pre-Kindergarten:  3rd grade:  7th grade:  11th grade:

Kindergarten:  4th grade:  8th grade:  12th grade:

### **Pricing Information**

Select the Copy button (orange arrow) to copy pricing information from site- Sponsor may select another like site (example elementary to elementary with same pricing) This information will then populate to question 11.

**Question 11** - Select the pricing Information from the drop-down list for each meal type. The choices are:

- **Pricing** for schools with free/reduced/paid students;
  - Add the student paid lunch price set by the school system. North Carolina reimburses \$.40 for each reduced lunch served; therefore, students are not charged. The listed price would be **\$0.00** in the site application.
  - Add the paid breakfast price set by the school system. North Carolina reimburses \$.30 for each reduced breakfast served; therefore, students are not charged. The listed price would be **\$0.00** in the site application..
- **Non-Pricing CEP** for schools claiming through CEP; and
  - The paid and reduced student lunch and breakfast price is **\$0.00**.
- **Non-Pricing Universal Free** for schools opting to feed all students at no price to the student.
  - Meals are claimed for reimbursement through the free/reduced/paid status of each child.
  - The student lunch price listed for paid and reduced would be **\$0.00**.
- Enter the price charged for an adult meal.
  - If the adult meal is sold as A la Carte pricing, add **\$0.00** as the price.
  - The adult meal price must equal or exceed the cost to produce the meal.
- If a sponsor participates in the Afterschool Snack Program (ASSP), pricing information will be entered in this area. The pricing will be "0" for Area Eligible Programs. The maximum charge in Non-Area Eligible Programs for reduced-price students is **\$0.15**.

**Pricing Information**

Copy pricing information from site:  

11.

Meal Type	Pricing Information	Paid	Reduced	Adult
National School Lunch Program (NSLP)				
School Breakfast Program (SBP)				
Afterschool Snack Program (ASSP)				

### **Community Eligibility Provision**

**Question 12** – Add the identified students from the April 1<sup>st</sup> CEP documentation from the previous April found in the Community Eligibility Provision Schedule.

**Question 13** – Add the student enrollment from the April 1<sup>st</sup> CEP documentation from the previous April found in the Community Eligibility Provision Schedule.

**Question 14** - The Identified Student Percentage will self-populate based on the figures entered in questions 12 & 13.

<b>Community Eligibility Provision (CEP)</b>	
12. Identified Students:	0
13. Enrollment:	0
14. This Site's Identified Student Percentage (ISP):	0.00 %

### **Operating Information**

**Question 15** – Does the SFA claim meals/milk on the weekend at this site? Answer “Yes” or “No”.

- SFAs that offer Saturday school must submit a waiver request on letterhead to the State Agency. The SFA should include documentation supporting the need for weekend instruction. Once approved, the SFA will change the response to Question 15 to Yes. The SFA will check Saturday as an approved serving day.
- Waiver requests should be emailed to the Director of School Nutrition. Copy the Program Analyst and the Service Area Consultant.

**Question 16** – Does this site prepare meals/milk for another school site? If “Yes”, list the name and school number of the site where meals are transported.

**Question 17** – If this site prepares food answer “Yes” and go to question 18; if “No” select from the drop-down box the method for how food is provided. The options in the dropdown box are:

- Pre-packaged Satellite;
- Bulk Satellite;
- Central Kitchen;
- On-site Prep;
- Vended Meals;
- FSMC;
- Vending Machine Meal Service;
- Catered; and
- Combination.

If food is provided through a *Combination* of methods, select from the drop down the method most closely aligned with how food is provided.

**Question 18** – Check any situation below where the school requests an OvS waiver.

**Operating Information**

15. Does the SFA claim meals/milk on the weekend for this site?  Yes  No

16. Are meals/milk being prepared at this site for another site?  Yes  No  
If Yes, list site name(s) and number(s):

17. Does this site prepare food?  Yes  No  
If No, select:  
If Combination, identify which types:

18. Will the site request an Offer versus Serve waiver from the traditional meal pattern for any of the following events or situations?

- Field Trips
- Early Release Days
- Emergencies (weather related, disasters, etc.)
- EOG and/or EOC Testing
- Field Days
- Other (Describe below and attach official request to OVS Waiver for Special Situations checklist item)

### **Meal Service Information**

The following information is used to offer Technical Assistance and to select school sites for an Administrative Review. Responses to questions 19-25 assists the State Agency in determining the “Targeted Menu” school for the review.

**Question 19** – USDA National School Lunch Age/Grade Grouping Meal Patterns, please click all that apply.

**Question 20** – Enter the number of meals serving lines in this facility.

**Question 21** – Answer “Yes” or “No”. Please answer “Yes” if there is any self-service by students at any service line.

**Question 22** – Answer “Yes” or “No”.

**Question 23** – Answer “Yes” or “No”. Are any breakfasts or lunches served at alternate meal service areas?

**Question 24** – Answer “Yes” or “No”. If the site has earned this designation, answer “Yes”.

**Question 25** – Answer “Yes” or “No”. Does the site have a new manager/head cook/site manager in charge?

**Meal Service Information**

19. What are the age/grade group meal patterns offered at this site?

Breakfast:	Lunch:
<input type="checkbox"/> Pre-K Breakfast	<input type="checkbox"/> Pre-K Lunch
<input type="checkbox"/> K-5 Breakfast	<input type="checkbox"/> K-5 Lunch
<input type="checkbox"/> 6-8 Breakfast	<input type="checkbox"/> 6-8 Lunch
<input type="checkbox"/> 9-12 Breakfast	<input type="checkbox"/> K-8 Lunch
<input type="checkbox"/> K-12 Breakfast	<input type="checkbox"/> 9-12 Lunch

20. How many reimbursable meal service lines are in operation? If this site does not have traditional lines, indicate how many different locations students may select from the vegetable subgroup offerings.

21. Do students serve themselves foods via food bars, serving stations, and/or salad bars?  Yes  No

22. Does this site utilize cycle menus?  Yes  No

23. Are meals served at alternate meal service locations, such as classrooms, grab & go stations, etc?  Yes  No

24. Is this a HealthierUS Challenge site?  Yes  No

25. Does the site have a new kitchen manager, cook, or site manager?  Yes  No

**Residential Child Care Institutions (RCCIs only) This section will be grayed out to Traditional Public Schools, Charter Schools and Non-Public Schools.**

**Question 26** – Answer “Yes” or “No”. Is this site currently licensed by the state?

**Question 27** – If 50% or more of the residents are under 21 years of age answer “Yes”.

If “No”, answer the question, are residents under 21 years old housed separately?

**Question 28** – Choose from the drop-down box; “Residential Only” or “Residential and Day Students”

The screenshot shows a form titled "Residential Child Care Institutions (RCCIs)". It contains three questions with radio button options:

- 26. Is this site currently licensed by the state?  Yes  No  N/A
- 27. Are 50% or more of the residents in this facility under 21?  Yes  No  N/A  
If No, are all residents age 21 or younger housed separately?  Yes  No  N/A
- 28. What is the student population type?

**At Risk Afterschool Meals Program (ARAMP)**

**Question 29** – If “Yes”, go to next question. If “No”, will the site apply to participate in the ARAMP during the current school year? Answer “Yes” or “No”.

**Question 30** – Does the site provide meals for the ARAMP for non-school entities? If “Yes”, please list the names of all school site’s where meals are provided.

The screenshot shows a form titled "At Risk Afterschool Meals Program (ARAMP)". It contains two questions with radio button options:

- 29. Is the site currently participating in the At-Risk Afterschool Meals Program offered through NC-DHHS CACFP?  Yes  No  
If no, will the site apply for the program during the school year?  Yes  No
- 30. Does this site provide meals to non-school entities?  Yes  No  
If yes, please provide the names of all sites below:

**Section A – National School Lunch Program (NSLP)**

**Question A1** - Check each month the site will operate the NSLP. Check for accuracy. If the SFA leaves off a month the claim for that month will not be accepted.

**Question A2** – Check each day of the week lunch will be provided and claimed for reimbursement. Verify and confirm each day of meal service is checked.

**Question A3** – Add the begin and end time of lunch service. Lunch may not begin prior to 10:00 AM without prior approval from the State Agency. Meal Time Waiver request should be emailed to the Director of School Nutrition on letterhead. Copy the Program Analyst and the Service Area Consultant.

**Question A4** – Answer “Yes” or “No”. Do you offer vending machine reimbursable lunches?

**Question A5** – Offer vs Serve (OVS) is required for grades 9-12. If “No” for grades 9-12, an approved Waiver Request is required from the State Agency. OVS Waiver for Special Situations request should be emailed to the Director of School Nutrition on letterhead. Copy the Program Analyst and the Service Area Consultant.

- Family style service is table service in bowls where students are served a reimbursable meal from each table.
- 

**Question A6** – Only check the grades participating in OVS.

**Question A7** – The prototype Food Production Record should be the most recently updated version provided by the State Agency. If a non-prototype production record is used, the SFA must upload to the ‘School Nutrition Program Site’ checklist a signed and dated Attestation of Compliance with Production Record Requirements template on letterhead and a Daily Meal Production Record Variance Checklist.

**Question A8** –

- Choose from the drop-down box the procedure that describes your collection procedure: *Verbal Identifiers, Coded Ticket/Token, Coded ID Cards/Automated Key-Pad Entry, Roster, Bar-Coded and magnetic strip cards, Automated Tab tickets, Combination and Other*. If Other/Combination selected give the collection method used in the space provided.
- Choose from the drop-down box the procedure that describes your counting procedure. *Automated/computerized, Cash Register, Cash Register & Roster, Clicker (counting/claiming in one category), Electronic Device (e.g. wand, pen/roster), ID Card, Roster, Combination and Other*. If Other/Combination selected give the counting method used in the space provided.
- Are meals counted at the point of service? The answer must be “Yes” to be compliant with USDA regulations.
- Add the total enrollment at this site as well as the enrollment broken down in the free/reduced/paid categories. This information must be kept up to date.

**Section A - NATIONAL SCHOOL LUNCH PROGRAM (NSLP)**

A1. Months of Operation: (Check all that apply)

All:  Jul:  Aug:  Sep:  Oct:  Nov:  Dec:   
 Jan:  Feb:  Mar:  Apr:  May:  Jun:

A2. Days of the week meals are served and claimed for reimbursement: (Check all that apply)

Mon-Fri:  Mon:  Tue:  Wed:  Thu:  Fri:  Sat:  Sun:

A3. Meal Service Times  
 Begin Time: \_\_\_\_\_ End Time: \_\_\_\_\_

A4. Is the reimbursable meal available via a vending machine?  Yes  No

A5. Will Offer versus Serve (OVS) be implemented for Lunch?  Yes  No  
 If No, is documentation on file to approve this site's waiver of OVS?  Yes  No  
 If Yes, are meals served family style?  Yes  No

A6. What grades are implementing Offer versus Serve (OVS) for Lunch?

All:  Early Education:  1st grade:  5th grade:  9th grade:   
 Head Start:  2nd grade:  6th grade:  10th grade:   
 Pre-Kindergarten:  3rd grade:  7th grade:  11th grade:   
 Kindergarten:  4th grade:  8th grade:  12th grade:

A7. Will the prototype Food Production Record provided by NCDPI be used?  Yes  No  N/A  
 If No, submit a copy of the production record to NCDPI for approval prior to use.  
 If no, is this production record different from the form used in all schools?  Yes  No

A8. Collection procedures for Lunch:  
 If Other/Combination, please explain:  
 Counting procedures for Lunch:  
 If Other/Combination, please explain:  
 Are meals counted at the point of service?  Yes  No  N/A

Current Enrollment at this site  
 Total:  
 Free:  
 Reduced:  
 Paid:

**Section B – School Breakfast Program (SBP)**

**Question B1** - Check each month the site will operate the SBP. Check for accuracy. If the SFA leaves a month of operation unchecked, the claim for that month will not be accepted.

**Question B2** - Check each day of the week breakfast will be provided and claimed for reimbursement. Verify and confirm each day of meal service is checked.

**Question B3** - Add the begin and end time of breakfast service. Breakfast may not extend past 9:59 AM without prior approval from the State Agency. The SFA must submit a waiver request on letterhead to the State Agency.

OVS Waiver for Special Situations request should be emailed to the Director of School Nutrition on letterhead. Copy the Program Analyst and the School Nutrition Service Area Consultant.

**Question B4** - Do you offer reimbursable breakfasts from a vending machine? Answer “Yes” or “No”.

**Question B5** – Offer vs Serve (OVS) is not required for breakfast service but may be offered. Answer “Yes” if any grades are implementing OVS. Are any breakfasts served family style? Answer “Yes” or “No”.

**Question B6** - Only check the grades participating in OVS.

**Question B7** - The prototype Food Production Record should be the most recently updated version provided by the State Agency. If a non-prototype production record is used, the SFA must upload to the ‘School Nutrition Program Site’ checklist a signed and dated Attestation of Compliance with Production Record Requirements template on letterhead and a Daily Meal Production Record Variance Checklist.

**Question B8** – Check all types of breakfast service that apply to this site. If other, please describe the particular service provided.

**Section B - SCHOOL BREAKFAST PROGRAM (SBP)**

B1. Months of Operation: (Check all that apply)

All:  Jul:  Aug:  Sep:  Oct:  Nov:  Dec:   
 Jan:  Feb:  Mar:  Apr:  May:  Jun:

B2. Days of the week meals are served and claimed for reimbursement: (Check all that apply)

Mon-Fri:  Mon:  Tue:  Wed:  Thu:  Fri:  Sat:  Sun:

B3. Meal Service Times      Begin Time:      End Time:

B4. Is the reimbursable meal available via a vending machine?       Yes  No

B5. Will Offer versus Serve (OVS) be implemented for Breakfast?       Yes  No  
 If Yes, are meals served family style?       Yes  No

B6. What grades are implementing Offer versus Serve (OVS) for Breakfast?

All:  Early Education:  1st grade:  5th grade:  9th grade:   
 Head Start:  2nd grade:  6th grade:  10th grade:   
 Pre-Kindergarten:  3rd grade:  7th grade:  11th grade:   
 Kindergarten:  4th grade:  8th grade:  12th grade:

B7. Will the prototype Food Production Record provided by NCDPI be used?       Yes  No  N/A  
 If No, submit a copy of the production record to NCDPI for approval prior to use.  
 If no, is this production record different from the form used in all schools?       Yes  No

B8. During the year, will this site offer breakfast through any of the following methods? Check all that apply.

Traditional  
 Breakfast in the Classroom  
 Second Chance Breakfast  
 Breakfast Break  
 Satellite Breakfast/Breakfast Kiosk  
 Breakfast on the Bus  
 Grab n Go  
 Universal Free Breakfast  
 Other (Describe below.)

**Question B9 –**

- Choose from the drop-down box the procedure that describes your collection procedure: *Verbal Identifiers, Coded Ticket/Token, Coded ID Cards/Automated Key-Pad Entry, Roster, Bar-Coded and magnetic strip cards, Automated Tab tickets, Combination and Other.* If Other/Combination selected give the collection method used in the space provided.
- Choose from the drop-down box the procedure that describes your counting procedure: *Automated/computerized, Cash Register, Cash Register & Roster, Clicker (counting/claiming in one category), Electronic Device (e.g. wand, pen/roster), ID Card,*

*Roster, Combination and Other.* If Other/Combination selected give the counting procedure used in the space provided.

- Are meals counted at the point of service? The answer must be “Yes” to adhere to USDA regulations.
- Add the total enrollment at this site as well as the enrollment broken down in the free/reduced/paid categories. This information must be kept up to date.

**Question B10 –** Lunches claimed for School Year (two (2) years prior) determine the qualification for the Severe Need Breakfast Reimbursement Rate Determination for two years in the future or (current school year). These boxes are populated by the State Agency. If 40% or more lunches are served free/reduced two years in prior, the school qualifies for the Severe Need Breakfast reimbursement rate.

B9. Collection procedures for Breakfast: Coded ID cards/Automated Key Pad Entry  
If Other/Combination, please explain:  
Counting procedures for Breakfast: Automated/Computerized  
If Other/Combination, please explain:  
Are meals counted at the point of service?  Yes  No  N/A  
Current Enrollment at this site  
Total: 339  
Free: 339  
Reduced: 0  
Paid: 0

B10. Lunches claimed for School Year (2020 - 2021) - Severe Need Breakfast Reimbursement Rate Determination

Total Free Lunches	Total Reduced Price Lunches	Total Paid Lunches	Total Lunches	Free & Reduced %	Qualify for Severe Need Breakfast Reimb. Rate
0	0	0	0	0.00%	No

### Certification

Read the statement and check both certification boxes attesting the information added to the site agreement is correct. The site application will show an error message if the boxes are not selected.

**Certification**

I certify that the information on this site application is true and correct to the best of my knowledge. I understand this information is being given in connection with receipt of federal funds; Department officials may, for cause, verify information and the deliberate misrepresentation will subject me to prosecution under applicable federal and state criminal statutes. The SFA hereby agrees to comply with all state and federal laws and regulations, as well as policies of the State Board of Education, governing School Nutrition Programs. The SFA acknowledges that no reimbursement will be provided at this site for any meal/snack service that has not received prior approval by the Department. I understand that federal or state officials may make announced and/or unannounced visits at any participating site to monitor compliance.

The person signing below will ensure that all monthly claims for reimbursement represent meals served by category and that records are available to support these claims. It is acknowledged that once signed and when approved by the North Carolina Department of Public Instruction, this application places in force the permanent agreement effective with the current program year start date and any subsequent addendum for the current program year.

I certify the months of operation for each program selected above accurately reflects the months that meals/snacks/milk will be served to students and claimed for Federal reimbursement. I understand any meals/snacks/milk served outside of the months selected will not be eligible for reimbursement since federal regulation prohibits retroactive program approval/reimbursement.

Save your information by selecting the red save button, see green arrow below.

An error message will appear if all questions are not answered. If you cancel, information will not be saved.



## Site Application Summary, Verify Program Participation Months

- Click Application
- Click Application Packet
- Select School Nutrition Program

Action	Form Name
<a href="#">View</a>   <a href="#">Revise</a>	✔ SFA Application
<a href="#">View</a>   <a href="#">Admin</a>   <a href="#">Revise</a>	✔ Community Eligibility Provision (CEP) Schedule
<a href="#">Details</a>	✔ Meal Pattern Compliance Dashboard
<a href="#">Details</a>	✔ Checklist Summary (14)
<a href="#">Details</a>	Application Packet Notes
<a href="#">Details</a>	Attachment List

Site Applications	Approved	Pending	Return for Correction
<a href="#">School Nutrition Program</a>		0	0

### Select Site Application Summary

640 Status: Active  
**Nash County Public Schools**  
 380 North Winstead Street  
 Nashville, NC 27856  
 Region: 11

[Site Application Summary](#)

Action	Selected Site ID / Site Name	NSLP	SBP	ASSP	SMP	FFVP	Version/ Status	Snack Elig.%
<b>Select All:</b> <input type="checkbox"/>	<b>Totals</b>	29	29	20	0	0		
<a href="#">View</a>   <a href="#">Revise</a> ✔	<input type="checkbox"/> 302 Fairview Early Childhood Center	X	X				Rev. 2 / Approved	100.0000
<a href="#">View</a>   <a href="#">Revise</a> ✔	<input type="checkbox"/> 304 Bailey Elementary	X	X	X			Rev. 4 / Approved	74.4917
<a href="#">View</a>   <a href="#">Revise</a> ✔	<input type="checkbox"/> 306 Baskerville Elementary	X	X	X			Rev. 3 / Approved	100.0000

View Program participation, enrollment data, months of operation for lunch, breakfast and snack. NAE refers to Non Area Eligible, AE is Area Eligible.

Site ID	Site Name	Programs			Enrollment (NSL)		Lunch					Breakfast					Snack																							
		NSL	SBP	NAE/AE	Total	Free	Redc	Paid	OVS	J	A	S	O	N	D	J	F	M	A	M	J	J	S	N	J	A	S	O	N	D	J	F	M	A	M	J				
302		X	X		339	339	0	0	X													X																		
304		X	X	X	615	615	0	0	X													X																		
306		X	X	X	398	398	0	0	X													X																		

## After School Snack Program (ASSP)

### Program(s) Operating

The month before the Afterschool Snack Program is to begin operation, fill out the application for the program. Complete the Pre-Qualifying Checklist and keep it on file. Additionally, the Afterschool Snack Program must operate after the end of the school day to qualify for reimbursement.

To Add the Afterschool Snack Program to a site, click on Modify Program Selection tab, see orange arrow below. Then, check the box in Section C for Afterschool snack program (see green arrow below), then click the red Save and Continue tab. Once this box is activated, you will see the Afterschool Snack Program in the Site application.

The screenshot displays the 'Program(s) Operating' section of an application. It features two identical panels. The top panel shows a list of programs with checkboxes: A. National School Lunch Program (NSLP) CFDA #10.555, B. School Breakfast Program (SBP) CFDA #10.553, C. Afterschool Snack Program (ASSP) CFDA #10.555, and D. Special Milk Program (SMP) CFDA #10.556. A 'Modify Program Selection' button is located to the right. A green arrow points to the checkbox for 'C. Afterschool Snack Program'. Below this list, a section titled 'Check all that apply:' contains the same list of programs, with checkboxes for A, B, and C checked. A red 'Save and Continue' button is at the bottom. The bottom panel is identical but shows the 'C. Afterschool Snack Program' checkbox as checked, and the 'Save and Continue' button is now red.

### After School Snack Site Information Non-Area Eligible or Area Eligible

**Question C1** – Check the months the program will be operating.

**Question C2** – Check the days of the week snacks will be served and claimed for reimbursement.

**Question C3** – List the snack service times. These must be kept up to date in the application.

**Question C4** – Enter the end time of the normal school day. Afterschool snack may not be served until after the regular school day ends. The only exception is if the school is operating an extended day and has State Agency permission to operate the program prior to the end of the extended school day.

**Question C5** - The prototype Food Production Record should be the most recently updated version provided by the State Agency. If a non-prototype production record is used, the SFA must upload to the 'School Nutrition Program Site' checklist a signed and dated Attestation of Compliance with Production Record Requirements template on letterhead and a Daily Meal Production Record Variance Checklist.

**Question C6** –

- Choose from the drop-down box the procedure that describes your collection procedure: *Verbal Identifiers, Coded Ticket/Token, Coded ID Cards/Automated Key-Pad Entry, Roster, Bar-Coded and magnetic strip cards, Automated Tab tickets, Combination and Other*. If Other/Combination selected give the collection method used in the space provided.
  - Choose from the drop-down box the procedure that describes your counting procedure:
    - *Automated/computerized, Cash Register, Cash Register & Roster, Clicker (counting/claiming in one category), Electronic Device (e.g. wand, pen/roster), ID Card, Roster, Combination and Other*. If Other/Combination selected give the counting method used in the space provided.
  - Are meals counted at the point of service? The answer must be “Yes” to be compliant with USDA regulations.
  - Add the enrollment for students participating in the ASSP at this site. This number should be broken down in the free/reduced/paid categories for non-area eligible sites. ASSP enrollment should not include the entire school enrollment. This should include enrollment for program participants only.

**Section C - AFTERSCHOOL SNACK PROGRAM (ASSP)**

C1. Months of Operation: (Check all that apply)

All:  Jul:  Aug:  Sep:  Oct:  Nov:  Dec:   
 Jan:  Feb:  Mar:  Apr:  May:  Jun:

C2. Days of the week snacks are served and claimed for reimbursement: (Check all that apply)

Mon-Fri:  Mon:  Tue:  Wed:  Thu:  Fri:  Sat:  Sun:

C3. Snack Service Times Begin Time: :00 End Time: :00

C4. What time does the normal school day end? :00

C5. Will the prototype Food Production Record provided by NCDPI be used?  Yes  No  N/A  
 If No, submit a copy of the production record to NCDPI for approval prior to use.  
 If no, is this production record different from the form used in all schools?  Yes  No

C6. Collection procedures for ASSP:   
 If Other/Combination, please explain:   
 Counting procedures for ASSP:   
 If Other/Combination, please explain:   
 Are meals counted at the point of service?  Yes  No  N/A

Current Enrollment at this site

Total:   
 Free:   
 Reduced:   
 Paid:

**Question C7** – Describe the enrichment activities that are offered to students in the afterschool program.

C7. Describe educational or enrichment activities for Afterschool Snack Program:

PROGRAM #1  
 3:05-3:20 Snack (provided)  
 2-20-4:00 Round 1 / 20 in EL / 20 in Math

**Question C8** – The free/reduced enrollment percentage self populates.

C8. Free and Reduced Enrollment Percentage: 100.00 %

Site is:  Attendance Area Eligible - Eligible based on this site (claim all snacks free).

Attendance Area Eligible - Eligible based on another site (claim all snacks free).

Non-Area Eligible (claim all snacks free, reduced and full price).

Select the qualifying site for the Afterschool Snack Program:

Other:

**Qualifying Sites**

- The Snack Eligibility Percentage is found in the Online Agreement
  - Includes Free and Reduced Data
  - Includes CEP Data
- A Snack Eligibility percentage greater than 50 qualifies a site for participation in the ASSP at the free reimbursement rate.

Site ID / Site Name	Totals	NSLP	SBP	ASSP	SMP	FFVP	Version/ Status	Snack Elig.%
304 A L Stanback Middle	X	X	X				Rev. 1 / Approved	59.6273
308 River Park Elementary	X	X	X				Original Approved	34.8754
310 Cedar Ridge High	X	X					Original Approved	44.8523
312 Central Elementary	X	X	X				Original Approved	74.6622
316 Orange Middle School	X	X	X				Original / Approved	40.9178

**Qualifying Sites- Free and Reduced Data**

- The site must be at 50% or above to be considered area eligible.
- If the site is above 50% click the first radial button.
- If the site is qualified to be area eligible based on a feeder school which has 50% or more free and reduced students click the second radial button and select the name of the qualifying school from the drop-down box.
- If the qualifying school is not listed provide it in the comment section.
- If the site does not qualify for area eligibility, click the third radial button. Snacks will be reimbursed based on the free/reduced/paid status of each child.

**Qualifying Sites- CEP Data**

- To determine area eligibility for a CEP school’s attendance area, the individual school’s identified student percentage (ISP) is multiplied by a factor of 1.6.
- If the resulting percentage is at least 50, meal sites within the school’s attendance area are area eligible.
- Individual school data must be used to determine area eligibility, even if the school is participating in CEP as part of a group or district claiming with a shared ISP.

- If the school’s ISP is at least 31.25, meal sites located in the attendance area of the school are area eligible (i.e., 31.25% x 1.6 = 50%).
- ISP data may only be used to determine area eligibility for schools electing CEP.
- If a school electing CEP collects alternate household income information to be used for other purposes, school data based on these applications may not be used to determine area eligibility. Refer to Policy Memo SP-08-2017

**Qualifying Sites- Census Data**

- Census data indicates that at least 50 percent of the children residing in the area are members of households that meet income standards for free or reduced-price meals.
- Utilize the No Kid Hungry (NKH) Averaged Eligibility Map
- ASSP sites may be determined as area eligible using either Census Block Groups (CBGs) or Census Tracts information found in the mapping tool

**Afterschool Snack Program (ASSP) Contact**

If responses to questions C9 through C12 is the Cafeteria Manager at the school site, click the box ‘Same as the Site Contact’ and C9 – C12 will be automatically populated. If not, completed Questions C9 to C12.

**Question C9** – Enter the Salutation, First Name and Last Name for the Afterschool Snack Contact at this site. Please make sure the salutation is correct.

**Question C10** – Enter the Email for the Afterschool Snack Program Contact.

**Question C11** – Enter the Phone Number, with Extension (if applicable) and Fax number (if applicable) for the Afterschool Snack Program Contact in Question C9.

**Question C12** – Enter the Title of the Afterschool Snack Program Contact listed in Question C9.

C7. Describe educational or enrichment activities for Afterschool Snack Program:

C8. Free and Reduced Enrollment Percentage: 44.51 %

Site is:  Attendance Area Eligible - Eligible based on this site (claim all snacks free).  
 Attendance Area Eligible - Eligible based on another site (claim all snacks free).  
 Non-Area Eligible (claim all snacks free, reduced and full price).

Select the qualifying site for the Afterschool Snack Program:

Other:

**AFTERSCHOOL SNACK PROGRAM (ASSP) Contact**

Same as the Site Contact

C9. Name: Salutation:  First Name:  Last Name:

C10. Email Address:

C11. Phone:  Ext:  Fax:

C12. Title:

Certification boxes must be checked before submitted. (See below arrows.)

**Certification**

I certify that neither the SFA nor its personnel is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal department or agency.

I certify that the information on this SFA application is true and correct to the best of my knowledge. I understand this information is being given in connection with receipt of federal funds; Department officials may, for cause, verify information and the deliberate misrepresentation will subject me to prosecution under applicable federal and state criminal statutes. The SFA hereby agrees to comply with all state and federal laws and regulations, as well as policies of the State Board of Education, governing School Nutrition Programs. The SFA acknowledges that no reimbursement will be provided for any meal/snack service that has not received prior approval by the Department. I understand that federal or state officials may make announced and/or unannounced visits at any participating site to monitor compliance.

Save your information by selecting the red save button, see green arrow below. An error message will appear if all questions are not answered. If you cancel, information will not be saved.



### Seamless Summer Option (SSO):

Under Site Application, Select Seamless Summer Option (See green arrow in chart below). The next screen is where you will select the site.

Questions 1-4 ask for specific information about the Site Supervisor and the Site Street Address.

**School Nutrition Programs** North Carolina Department of Public Instruction

Applications | Claims | Compliance | Reports | Security | Search Programs | Year | Help | Log Out

Applications > Application Packet > School Year: 2020 - 2021

**School Year** Application Packet

S3C Status: Active  
**MINA Charter School of Lee County**  
 No address on file for this year  
 Region: 5

Packet Submitted Date:  
 Packet Approved Date:  
 Packet Original Approval Date:  
 Packet Status: Not Submitted

Packet Assigned To: Rebecca Sharpe

Action	Form Name	Latest Version	Status
View   Modify   Admin	SFA Application	Original	Error
Details	Meal Pattern Compliance Dashboard		Pending
Details	➔ Checklist Summary (3)		
Details	Application Packet Notes		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	0	0	0	0	1	1
Seamless Summer Option	0	0	0	0	0	0	0

Show Packet History

### Site Supervisor:

**Question 1** – Enter the Salutation, First Name and Last Name of the Site Supervisor.

**Question 2** – Enter the Email Address for the Site Supervisor.

**Question 3** – Enter the Phone Number, Extension (if applicable) and Fax (if applicable) for the Site Supervisor.

**Question 4** – Enter the Site Supervisor's Title.

**Street Address:** This address and its accuracy are critical. Once approved, this is the physical location where children receive and consume meals. Ensure this address is correct.

**Question 5** – Enter the physical address for the site.

**Question 6** – Enter any additional address information as needed.

**Question 7** – Enter the City name for the site.

**Question 8** – The State of NC automatically populates; enter the zip code for the site.

**Question 9** – Enter the County where the site is located from the dropdown box.

The screenshot shows a web application interface for 'School Nutrition Programs' by the North Carolina Department of Public Instruction. The page title is 'SSO Site Application For School Year: 2020 - 2021'. It displays two school entries: '808 Status: Active Essie Mae Kiser Foxx Charter School' and '004 Status: Active ESSIE MAE KISER FOXX CHARTER SCHOOL'. Below the school information, there are sections for 'Site Supervisor' and 'Street Address'. The 'Site Supervisor' section includes fields for Name (with a dropdown for Salutation, and input for First and Last Name), Email Address, Phone (with Ext. and Fax fields), and Title. The 'Street Address' section includes fields for Address Line 1, Address Line 2, City, State (pre-filled with 'NC'), Zip, and County (a dropdown menu).

**Site Eligibility:**

**Years of Eligibility:** Shows *pending approval*.

- Once area eligibility is established, the duration of determination for site eligibility is five years.
- Any SSO sites that participate on the basis of area eligibility using school or census data are certified under that data for 5 years.
- Sites that participate on the basis of individual children's eligibility, such as closed enrolled sites and camps, must redetermine their eligibility each year.

**Question 10** – Select the type of site by clicking the appropriate circle (See green arrows below):

**Open Site** – A school or non-school site located within the geographical boundaries of a school, where at least 50% of students are eligible for free and reduced-price school meals.

**Restricted Open** - A site that meets the open site criteria, but is restricted for safety, control, or security reasons.

- Explain why the attendance is being limited due to security, safety, or control.

**Closed Enrolled** - A site that meets the 50% criteria, explained above, but serves only children in a specific program or activity, excluding academic summer school programs; NOTE: Academic summer schools are excluded.

- Explain why the site will operate as a closed site.

For Open, Restricted Open or Closed Enrolled sites, indicate what method was used to qualify the site by clicking the appropriate circle (blue arrow below) as being located within the geographical boundaries of a school, where at least 50% of students are eligible for free and reduced-price school meals.

**Qualified by:** % Free and Reduced approved from school data.

- Select the Qualifying Site name from the dropdown list.
- Enter the SFA Agreement Number
- Enter the eligible Site ID Number
- Enter the % Free/Reduced Eligible for School Meals

**Qualified by:** Census Data

Enter the Block Number (orange arrow below). Using the USDA Area Eligibility Map or the No Kid Hungry Averaged Eligibility Map, search for the exact address of the site using the search bar.

- When the page loads, there will be a location identified on the map; the color around the location will be either pink or blue.
- Pink indicates the site is area eligible.
- Blue indicates the site is not area eligible.
- Right click once slightly to the side of the location dot, a box will appear with information like the following:

*GEOID 371050304022*

*State North Carolina*

*FY 2021 Area Eligible? YES*

*CBG: Percentage of children (0-18) eligible for F/RP meals 100.00*

*CBG: Number of children (0-18) eligible for F/RP meals (Numerator) 500.00*

*CBG: Total children (0-18) (Denominator) 500.00*

*CBG: Percentage of children (0-12) eligible for F/RP meals 100.00*

*CBG: Number of children (0-12) eligible for F/RP meals (Numerator) 330.00*

*CBG: Total children (0-12) (Denominator) 330.00*

*Census Tract: Percentage of children (0-18) eligible for F/RP meals 67.60*

*Census Tract: Percentage of children (0-12) eligible for F/RP meals 68.50*

*The GEOID is the Block Number – enter the entire number for Block Number.*

*The third line, "FY 2021 Area Eligible?", will state whether the site is area eligible, which should match up with the color of the site (pink or blue).*

*Percentage of Needy Children: Using the same box of information from the Eligibility Maps that were used for the Block Number, look for a percentage that is 50% or greater and enter it as the Percentage of Needy Children.*

*Using the sample information from the USDA Area Eligibility Map shown above, the Block Number and Percentage of Needy Children would be:*

**Block Number: 371050304022**

*Percentage of Needy Children: 100.00 (it is acceptable to use data for children 0-18 or 0-12 years of age to establish eligibility)*

**Qualified by:** Income Eligibility Forms:

- Identify as Collected, on File or SFA Listing
- Enter the Projected Number of enrolled children.
- Enter the Projected Number of children eligible for free/reduced meals.
- Other – If selected, Explain

**Migrant** - Serves children of migrant families, as certified by a migrant coordinator.

**Camp** - Residential or non-residential day camps that offer regularly scheduled food service as part of an organized program for enrolled children; eligibility must be established for each child enrolled based on information from their schools, household income applications, or direct certification; meals are free for students eligible for free or reduced-price meals and paid meals are not reimbursed.

Select Residential or Non-residential (day camp)

If Non-residential, provide a description of the organized program.

Explain why a camp is being sponsored as a site.

Complete the following if Open, Restricted Open, or Closed Enrolled is selected:

Qualified by:

% Free and Reduced approved, school data.  
 Select the Qualifying Site for the Seamless Summer Option:

Eligible SFA Agreement Number:  
 Eligible Site ID:  
 % F/R Eligible for School Meals:

Census data  
 Census Tract No.  
 Block Group No.

Income eligibility forms are:  
 Collected  
 On File  
 SFA Listing

Projected number of children enrolled  
 Projected number of children eligible for free/reduced price meals

Other:  
 Explain:  
 Migrant (1-3 Meals)  
 Camp (1-3 Meals)  
 Residential  
 Non-residential (day camp)  
 If 'Non-residential' is selected, provide a brief description of the organized program.

Why sponsoring a camp?

Source of documentation for individual children's eligibility:  
 Regular School Year Eligibility (SFA Listing)  
 Application Submitted to Camp Site  
 Combination of both (Regular School Year Eligibility and Application Submitted to Camp Site)

Projected number of children enrolled  
 Projected number of children eligible for free/reduced price meals  
 Select to provide assurance camp will only claim reimbursement for children eligible for free or reduce price meals.

11. What is the Age/Grade Group?   
 What documentation was used to determine Age/Grade Group?

## Period of Operation

**Question 12** – Select: “Yes” or “No” Is the Site located in an area where the school operates on a year-round calendar?

**Question 13** - Operational Dates – use the Blue calendar to select the Start Date and End Date. The start date is the first date the site will operate, and the end date is the last date service will be provided by the site. Update dates as circumstances dictate. When you complete the question, consider holidays, weekends, or other days the sites will not operate when calculating the number of days.

**Question 14** - Enter Dates for planned Field Trips.

- **NOTE:** The State Agency must be notified of field trips to approve in advance all off-site meal consumption. Field trips must be entered to notify NCDPI at least 48 hours in advance of the scheduled field trip. Failure to notify the State Agency prior to meal service will result in disallowance of meals.
- Documentation for scheduled Field Trips may also be uploaded to the attachment list.

**Period of Operation**

12. Is the Site located in an area where the school operates on a year-round calendar?  Yes  No

13. Summer Operation Start: 10/1/2024 End: 9/30/2025  
 Dates: Click 'Calendar' to select the Meal Serving Dates: [Calendar](#)

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
4	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

14. Field Trip Dates:

## Meal Participation

**Question 15** – For Each Type of Meal to Be Served:

- Select the Meal Type.
- Click the calendar to select Meal Serving Dates
- Enter the Hour and Minutes when Meal Service Begins and when Meal Service Ends using the drop-down boxes.
- Enter an Estimated Number of Children that will be served.

**Meal Participation**

15. Check the meal type and service information:

Breakfast  AM Snack  Lunch  PM Snack  Supper

**Breakfast**

Copy from Meal: OR Copy from

B1. Meal Serving Dates: Start: 10/1/2024 End: 9/30/2025  
 B2. Click 'Calendar' to select the Meal Serving Dates: [Calendar](#)

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
4	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

B3. Time meal service begins: 7:25 AM  
 B4. Time meal service ends: 8:00 AM  
 B5. Estimated Number to be Served: 100

**AM Snack**

Copy from Meal: OR Copy from

A1. Meal Serving Dates: Start: End:  
 A2. Click 'Calendar' to select the Meal Serving Dates: [Calendar](#)

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
0	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

A3. Time meal service begins:  
 A4. Time meal service ends:  
 A5. Estimated Number to be Served:

**Lunch**

**Copy from Meal:** **OR Copy from**

L1. Meal Serving Dates: Start: End:

L2. Click 'Calendar' to select the Meal Serving Dates: Calendar

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
0	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

L3. Time meal service begins:

L4. Time meal service ends:

L5. Estimated Number to be Served:

**PM Snack**

**Copy from Meal:** **OR Copy from**

P1. Meal Serving Dates: Start: 10/1/2024 End: 9/30/2025

P2. Click 'Calendar' to select the Meal Serving Dates: Calendar

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
4	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

P3. Time meal service begins: 4:00 PM

P4. Time meal service ends: 5:00 PM

P5. Estimated Number to be Served: 100

**Supper**

**Copy from Meal:** **OR Copy from**

S1. Meal Serving Dates: Start: End:

S2. Click 'Calendar' to select the Meal Serving Dates: Calendar

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
0	0	0	0	0	0	0	0	0	0	0	0

Refresh From Calendar

S3. Time meal service begins:

S4. Time meal service ends:

S5. Estimated Number to be Served:

**Question 16** – Utilize the Tooltip feature to assist with responses. (blue arrow).

- Selecting 'Both' indicates the SFA intends to offer non congregated and congregated meals at the same site. (yellow arrow)
- If this site is providing rural, non-congregated meals, the heat waiver is not needed.
- Multiple days does not refer to when a SFA sends a breakfast home for the next day.
- Provide other non-congregated meal information pertinent to the services offered.

**Non-Congregate Meal Service Operation**

16. Do you plan to provide non-congregate meals at this site?  Yes  No  Both

If there is a waiver for non-congregate meals due to excessive heat, are you requesting this site be included?  Yes  No  N/A

Do you plan to provide non-congregate meals at this location as a rural location?  Yes  No

Will multiple days of meals be provided?  Yes  No

Check the day(s) meals will be distributed.

Mon-Fri:  Sun:  Mon:  Tue:  Wed:  Thu:  Fri:  Sat:

How many calendar days of meals are included?

Which meals are given in bulk (check all that apply)?

Breakfast  AM Snack  Lunch  PM Snack  Supper  None

Will meals be provided to parents/guardians?  Yes  No

Is this site providing home delivered meals?  Yes  No

Other non-congregate meal information:

**Meal Planning and Service**

**Question 17** – Select the menu planning option that will be used from the drop-down box. The options are:

- Traditional Food Based Menu Planning (FBMP)
- Enhanced Food Based Menu Planning (EFBMP)
- Nutrient Standard Menu Planning (NSMP)
- Assisted Nutrient Standard Menu Planning (ANSMP)
- Any Reasonable Approach
- Other

**Question 18** – Select “Yes” or “No” to describe the Meal Service questions:

Are any meals vended? “Yes” could be for meals purchased from a Caterer or FSMC (Food Service Management Contract) or SFA

Are meals prepared at this site?

Are meals transported to this site? “Yes” would be for meals prepared at another SFA kitchen and transported to the site for service.

**Question 19** – Select “Yes” or “No” Will Offer Vs Serve (OVS) be implemented?

**Provide an Explanation** for the response given for OVS.

**Question 20** – Enter the number of points of service where meals will be identified as reimbursable, counted, and served to children.

**Question 21** - Select “Yes” or “No”. Is this site a non-congregate site on excessive heat days? If “Yes”, the next question is required. If No, the next question is not required.

Will required documentation be maintained on file to document excessive heat days?  
This answer should be “Yes”

**Meal Planning and Service**

17. Indicate the menu planning option that will be used:

18. Meal Service:

Are any meals vended?  Yes  No

Are meals prepared on this site?  Yes  No

Are meals transported to this site?  Yes  No

19. Will Offer versus Serve (OVS) be implemented?  Yes  No

Please explain.

20. How will meal counts be collected for this site?

If Other explain:

21. How many Points of Service?

**Advertising**

**Question 22** - Enter Advertisement Date(s) for outreach to be conducted by the Sponsor in the box provided. This must be an actual date (month, day and year).

Select the Advertisement Method(s) used by selecting the box(s) below; mark all that apply. If "Other" is selected, please describe in the box.

**Organization Liaison**

**Question 23** – If the SFA is not providing personnel at the site, the name of the Organization and the Name and Title of the Person Responsible for communication between the SFA and the organization must be provided.

**SFA Monitoring Plan**

**Question 24** – Describe your plans for visiting, reviewing, and monitoring the site. The SFA must review the site’s compliance with meal counting, claiming, menu planning, and food safety requirements at least once during each site’s operation.

**Advertising**

22. Indicate below the date that outreach will be conducted and identify the advertisement methods you plan to use.  
(Not applicable for Closed Enrolled and Camp sites)

Advertisement Date(s):

Newspaper announcement/press release  TV/Radio

Flyers - neighborhood  Flyers - school  Posters and signs

SFA website  School newspaper

Other

---

**Organization Liaison**

23. If SFA is not providing site personnel, please provide the name of the organization and title of the person responsible for communication between the SFA and the organization:

Organization:  Person Responsible:

---

**SFA Monitoring Plan**

24. Describe plans to visit, review and monitor sites:

**Severe Need Breakfast Qualification**

**Question 25** - This information automatically populates.

**Certification**

Read the information and check the certification box attesting the information added to the site agreement is correct. The site application will show an error message if the box is not selected.

**Severe Need Breakfast Qualification**

25. Severe Need Breakfast Eligibility based on Qualifying School

Total Free Lunches	Total Reduced Price Lunches	Total Paid Lunches	Total Lunches	Free & Reduced %
<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0%

**Certification**

I certify that the information on this site application is true and correct to the best of my knowledge. I understand this information is being given in connection with receipt of federal funds; Department officials may, for cause, verify information and the deliberate misrepresentation will subject me to prosecution under applicable federal and state criminal statutes. The SFA hereby agrees to comply with all state and federal laws and regulations, as well as policies of the State Board of Education, governing Child Nutrition Programs. The SFA acknowledges that no reimbursement will be provided at this site for any meal/snack service that has not received prior approval by the Department. I understand that federal or state officials may make announced and/or unannounced visits at any participating site to monitor compliance.

The person signing below will ensure that all monthly claims for reimbursement represent meals served by category and that records are available to support these claims. It is acknowledged that once signed and when approved by the North Carolina Department of Public Instruction, this application places in force the permanent agreement effective with the current program year start date and any subsequent addendum for the current program year.

Save your information by selecting the red save button, see green arrow below. An error message will appear if all questions are not answered. If you cancel, information will not be saved.

