

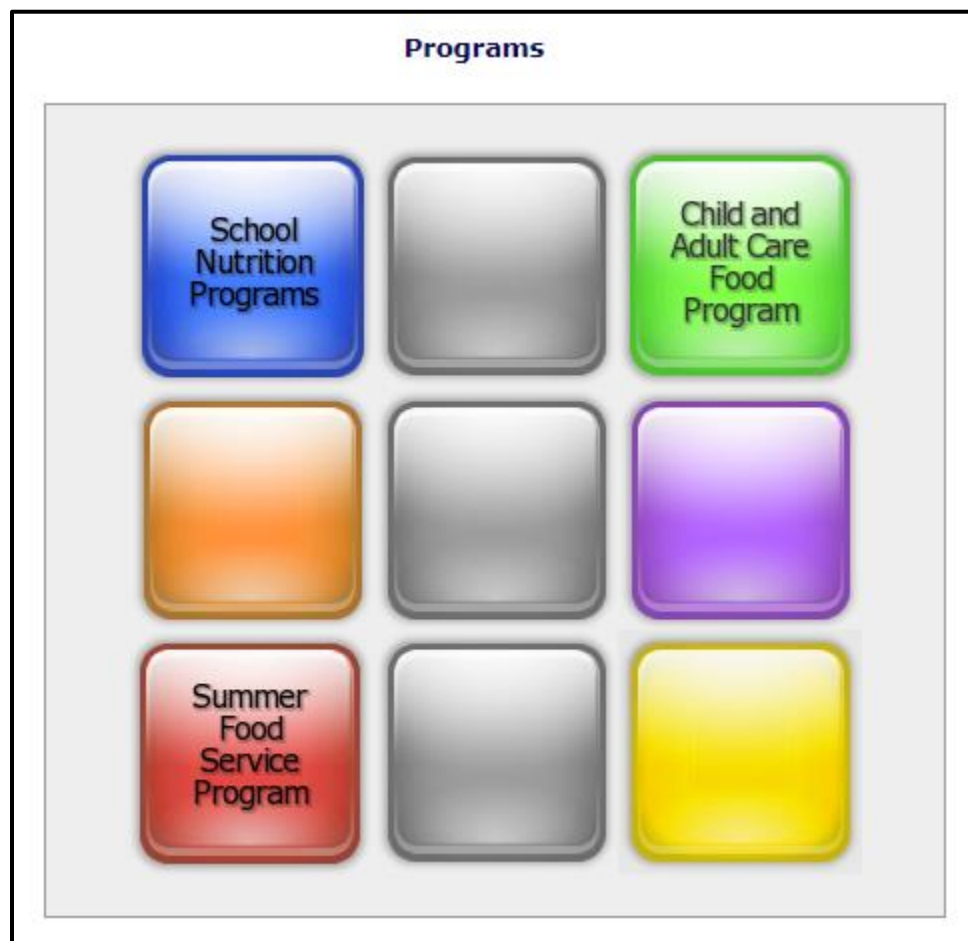


## SFSP Application Renewal Guide

October 22, 2020

Visit CNP: <https://nutrition.education.ne.gov> and use your username and password to login.

Access the Summer Food Service Program (SFSP) application by clicking on the red "Summer Food Service Program" box:





Access and print the 2019-20 SFSP Application to use as a helpful guide by clicking on "Year" in the upper right and selecting 2019-2020 from the list:

**Summer Food Service Program**

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

Select Year >

**Year Select**

Select Year

2020 - 2021
<b>2019 - 2020 &lt; Selected</b>
2018 - 2019
2017 - 2018
2016 - 2017
2015 - 2016
2014 - 2015

Then choose "Applications" from the upper left and choose "Application Packet" from the Item list. Print the parts of the application packet you'd like to refer to for assistance completing the 2020-21 SFSP application.

**Summer Food Service Program**

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

Applications > Program Year: 2019 - 2020

Item	Description
Sponsor Manager	SFSP Sponsor's Profile, Site and Hold Information
<b>Application Packet</b>	SFSP Applications Forms (Sponsor and Site)
Advance Requests	Request Sponsor's SFSP Advance(s) for the current year
Download Forms	Forms Available for Downloading

Now, access the 2020-2021 SFSP application by selecting "Year" from the upper right; choose 2020-2021 from the list. Choose "Applications" from the upper left, then "Application Packet" and choose the 2020-2021 Program Year:

Program Year	Date Range	Application Packet
<b>NEW!</b> 2020 - 2021	10/01/2020 - 09/30/2021	Not Started
<b>NEW!</b> 2019 - 2020	10/01/2019 - 09/30/2020	Application Packet on File
2018 - 2019	10/01/2018 - 09/30/2019	Application Packet on File

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Click the red "Enroll" button:

**The Sponsor has not started in the current year (2021).**

Click 'Enroll' to enroll for this year based on your prior year's information.

**Enroll** Cancel

The Application Packet page will display:

Action	Form Name		Latest Version		Status		
View   Modify	➔	Sponsor Application	Original		Pending Validation		
Add	➔	Budget Detail					
Details	➔	Food Production Facility List (5)					
Details		Site Field Trip List					
Details		Checklist Summary					
Details		Attachment List					
Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78
< Back		Submit for Approval		Withdraw Packet			

Complete the items in the Application Packet in this order:

1. Sponsor application;
2. Food Production Facility List *ONLY* if school has vendor agreement to receive meals from an SFA.
3. Site application(s);
4. Budget Detail;
5. Checklist summary (if there is not a red arrow here then there is nothing to submit or update)

Action	Form Name	Latest Version	Status				
View   <b>Modify</b>	➔ Sponsor Application	Original	Pending Validation				
Add	➔ Budget Detail						
Details	➔ Food Production Facility List (5)						
Details	Site Field Trip List						
Details	Checklist Summary						
Details	Attachment List						
Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78

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Submit for Approval

Withdraw Packet



## Sponsor Application

Select "Modify" to access the Sponsor Application. Some information from a previously approved site application will roll over to the current program year. See table below that identifies information that will roll over; some information does not populate and will need to be provided. Please make sure all information contained in the sponsor application is correct and current.

Questions' answers that roll over	Questions that need to be entered
1 – 22, 29	14, 23 – 28, 30
	Reporting requirements must ensure the sponsor's physical address's zip code includes the additional four digits and that the renewal date is within the last 12 months.
	Certification questions 31 & 32

Provide a training date of 10/1/2020 in one of the following answers: #14, #23 or #25.

General Questions	
26. Does your agency provide year round public services to the community(ies) other than operating the SFSP? <input checked="" type="radio"/> Yes <input type="radio"/> No If <b>No</b> , which of the following circumstances supports your need to operate SFSP? <div></div> If <b>Other</b> , please describe. <div></div>	Answer "Yes" in #26.
27. Indicate meal count procedures (Check all that apply) <input checked="" type="checkbox"/> Count each complete meal as it is served <input type="checkbox"/> Other If <b>Other</b> , please describe. <div></div>	Choose "Count each complete meal as it is served" in #27.
28. List any federal agency providing financial support to your agency or enter "None": <div>NSLP</div>	Record "NSLP" in #28.
29. Did your organization receive more than \$750,000.00 in federal funds in your last fiscal year? <input checked="" type="radio"/> Yes <input type="radio"/> No If Yes, list ending month of Sponsor Fiscal year: <div>August</div> If Yes, 'Organization-Wide Audit' documentation is required.	If answer to #29 is "Yes", provide audit month.
30. Will Sponsor use CACFP meal pattern (226.20) for children ages 1-6? <input type="radio"/> Yes <input checked="" type="radio"/> No	Answer "No" in #30.

Provide the DUNS number renewal information in the Reporting Requirements section. The renewal date cannot be more than 12 months old. Include the additional four digits with the zip code and mark the confirmation box. (See picture on page 5.)



Reporting Requirements	
Dun and Bradstreet Data Universal System Number (nine (9) digit DUNS Number): <input type="text"/>	
Click <a href="#">here</a> if this number does not match your records. Please contact NDE to change the DUNS number. Normally, the DUNS number will not change unless the sponsor has changed their Federal Tax ID number (FTIN).	
Physical address zip code from the System for Awards Management (SAM) Registration: <input type="text"/>	
Click <a href="http://www.usps.com">www.usps.com</a> to verify the zip code + 4.	
Date the Registration was completed or renewed: <input type="text"/>	
Sponsors are strongly encouraged to maintain a copy of the confirmation email received from SAM Registration.	
<input checked="" type="checkbox"/> By checking the confirmation box and providing the date of registration or renewal, the Sponsor is confirming successful online registration or renewal in SAM Registration.	
For further instructions, see Download Forms, document SAM_SFSP.	

Answer the certification questions shown below and mark the certification box indicating that everything contained in the application is correct.

Certification	
31. State policies and rules require a sponsor to certify information regarding past business participation and criminal background. Please answer the following questions:	
a. Has the sponsor or any of the sponsor's principals participated in any publicly funded programs within the past seven years?	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>NOTE: Principal</b> means any individual who holds a management position within, or is an officer of, the sponsor, including all members of the sponsor's board of directors, or otherwise exercises control of, or determines the actions of, the sponsor.	
<b>Publicly funded</b> means money that is received from a local, state, or federal governmental agency.	
b. Within the past seven years, has the sponsor or any principals been declared ineligible to participate in any publicly funded programs for violating program requirements?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If yes, answer question c.	
c. Were the violations corrected and eligibility restored, including payments of debts owed?	<input type="radio"/> Yes <input type="radio"/> No
d. Has the sponsor or any of the sponsor's principals been convicted of any activity that occurred within the past seven years that indicated a lack of business integrity?	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>NOTE: A lack of business integrity</b> includes fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, and obstruction of justice.	
32. <input checked="" type="checkbox"/> I hereby certify that neither the Sponsor nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.	

Comments from Sponsor	
<div></div>	
Created By:	Modified By:
<div>Save Cancel</div>	

Click "Save" at the bottom and "Finish" when prompted. If the application is saved with errors, edit the application to fix the errors before moving on.

If the application is saved without errors, the Application Packet page will appear.



## Food Production Facility

Action	Form Name	Latest Version	Status
View   Modify	➔ Sponsor Application	Original	Pending Validation
Add	➔ Budget Detail		
Details	➔ Food Production Facility List		
Details	Site Field Trip List		
Details	Checklist Summary		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78

< Back   Submit for Approval   Withdraw Packet

A Food Production Facility should be entered *ONLY* if your school has an SFSP site that receives vended meals from another SFA. This facility will be used in #73 of the site application(s) *ONLY* if that site receives meals from a vendor. It is not necessary to add a Food Production Facility if the site(s) prepares meals onsite or at a central kitchen.

Select "Details" of the Food Production Facility List in the Application Packet page (see picture above). Then, choose "Add Facility" (see below):

Action	Facility Name	Status
Found: 0		
No data to display.		
< Back   Add Facility		

Complete the Food Production Facility Information, Facility Address, Facility Contact and Vended Facility Information sections. Click "Save" at the bottom; then click "Finish" when prompted.

Food Production Facility Information	
1. Food Preparation Type:	Vended
2. Facility Name:	
Facility Address	
3. Address Line 1:	
Address Line 2:	
4. City:	
5. State:	NE   Zip:
Facility Contact	
6. Name:	Salutation   First Name   Last Name
7. Email Address:	
8. Phone:	Ext:   Fax:
9. Title:	



Complete the Vended Facility Information section as you see below. Provide your specific information for #10, #13 and #14. Choose "Save."

Vended Facility Information	
10. If vended by a School Food Authority (SFA) or another SFSP Sponsor, enter SFA/Sponsor name. If vended by an entity other than an SFA or another SFSP Sponsor, enter the entity's name.	<input type="text"/>
11. If meals will be vended, indicate whether the Sponsor is using NDE-provided contract/agreement forms, approved alternate form or is exempt from competitive bidding and will use a simple written agreement.	<p><input type="radio"/> I will be using state agency's Invitation For Bid and contract (FNS 688)</p> <p><input checked="" type="radio"/> I am exempt from competitive bidding and will use a simple written agreement</p> <p><input type="radio"/> I have received state agency approval to use an alternate form</p>
12. Is the Sponsor extending the Food Service Management Company (FSMC) contract for which it went out for bid?	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p>
13. Contract Start Date:	<input type="text"/>
14. Contract End Date:	<input type="text"/>
15. Number of renewal years specified in the contract:	<input type="text" value="0"/>
16. Current extension number:	<input type="text" value="0"/>
Created By: on: 10/22/2020 2:21:05 PM Modified By: on: 10/22/2020 2:30:15 PM	
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

## Site Application(s)

Access the site application(s) by clicking on "Site Application(s)" at the bottom of the application packet page.

Action	Form Name	Latest Version	Status
<a href="#">View   Modify</a>	<a href="#">➔ Sponsor Application</a>	Original	Pending Validation
<a href="#">Add</a>	<a href="#">➔ Budget Detail</a>		
<a href="#">Details</a>	<a href="#">➔ Food Production Facility List (5)</a>		
<a href="#">Details</a>	Site Field Trip List		
<a href="#">Details</a>	Checklist Summary		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
<a href="#">Site Application(s)</a>	0	78	0	0	0	0	78



Choose "Modify" to complete each site application.

Action	Site ID / Site Name	Version/ Status
View   <b>Modify</b>	0054 Adams	Original / Pending Validation

Some information from a previously approved site application will roll over to the current program year. See table below that identifies information that will roll over; some information does not populate and will need to be provided. Please make sure all information contained in the site application(s) is correct and current.

Questions' answers that roll over	Questions that need to be entered
1 – 17	18 – 26
27 - 40	Selected questions from 43 – 70 including number of meal service days in each month, as well as start and end dates determined from the Calendar feature
Selected questions from 41 – 70 including meal service method, menu planning option, start and end times and average daily participation for each meal type the site provides	72 - 78
71 - 73	
79, 80 and comments from sponsor	

Update site contact information in question #1 – 17 as needed.

Answer questions #18 – 26 shown in the picture below. Please see text bubbles for guidance on question #19, 20, 22, 23, 24, 25 and 26.

(Continue on next page.)





Site Eligibility	
18. Is this site a licensed child care facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
19. If this site is a licensed child care facility, will this site only serve children who are enrolled for care?	<input type="radio"/> Yes <input type="radio"/> No
20. If this site will serve children who are enrolled for care and children from the community, will all children be served together and in a common area that is not licensed for child care?	<input type="radio"/> Yes <input type="radio"/> No
21. Is this site open only to enrolled summer school students who receive academic credit?	<input type="radio"/> Yes <input checked="" type="radio"/> No
22. Did this site operate last year? If no, enter pre-operational site visit date below.	<input checked="" type="radio"/> Yes <input type="radio"/> No
23. Did this site have serious deficiency findings or significant operational deficiencies last program year? If yes, enter pre-operational site visit date below.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> N/A
24. Has this site experienced significant SFSP staff turnover since last program year? If yes, enter pre-operational site visit date below.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> N/A
25. Date of the Sponsor's pre-operational site visit, if applicable.	<input type="text"/>
26. Do you know of another Summer Food Service Program or Seamless Summer Option feeding site within one-fourth mile?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If yes, list the name of the Sponsor and the name of the site that is within one-fourth mile. (If the site is under your sponsorship, you may list only the site's name.)	
The site within one-fourth mile is under my sponsorship: <input type="radio"/> Yes <input type="radio"/> No	
Sponsor Name: <input type="text"/>	
Site Name: <input type="text"/>	
Explain how the two or more sites will not serve the same group of children for the same type of meal service. <input type="text"/>	

Do not answer #19 or #20.

Answer "No" to #21.

If the site operated the SFSP in 2019-20, answer "Yes" to #22, and "No" to #23 and #24 and leave the site visit box blank in #25.

If the site operates within 1/4 mile of another SFSP site, answer "Yes" to #26 and provide this explanation: "serves school's students".

Update site type and eligibility information in question #27 – 30 as needed.

*If your school intends to serve **only enrolled students** and not all community children ages 1 – 18 years, select **Restricted Open** in #27.*

Please provide site eligibility information based on the most current eligibility data by following the steps outlined below.

**Priority 1:** A SY2019-20 NSLP monthly claim that demonstrates  $\geq 50\%$  of enrolled students qualify for Free or Reduced price meals (see green heading on page 10); or

**Priority 2:** School site does NOT have a SY2019-20 NSLP monthly claim that demonstrates  $\geq 50\%$  of enrolled students qualify for Free or Reduced price *but* does exist in an eligible area (see blue heading on page 11); or

**Priority 3:** Neither Priority 1 nor Priority 2 are applicable and Nebraska's statewide Area Eligibility Waiver must be used (see purple heading on page 13).



**School sites with  $\geq 50\%$  F/R price meal eligibility (see picture below):**

Determine which claim month in SY 2019-20 validates  $\geq 50\%$  F/R eligibility. Choose School Data in #28. Enter the claim month in which  $\geq 50\%$  of students were eligible for F/R price meals in Eligibility Data – Start date.

Choose School in #29.

Enter School District and Site Name in #30. Enter the percent value of students eligible for F/R meals in the claim month noted in #28 above.

Do not enter information for census data (block number, group number, percentage of needy children).

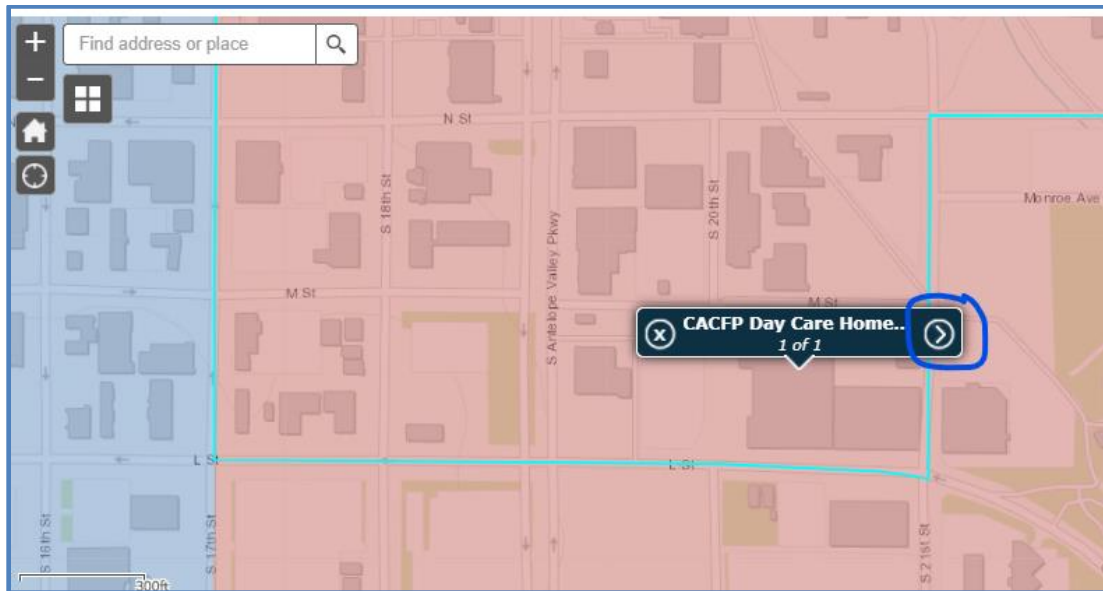
Answer #31 to explain why your school is choosing to operate a Restricted Open site. Recording “COVID19” in that space is sufficient.

Site Type	
Indicate the Site Type, the Eligibility Method, and the Primary Service provided by this site.	
27. Site Type:	Restricted Open
28. Eligibility Method:	School Data
For School Data or Census Data Eligibility Methods, indicate the Start Date.	
Eligibility Data - Start date:	
Eligibility Data - Expiration date:	09/30/2023
29. Primary service provided by this site:	School
If Service is Other, describe:	
30. If School Data is selected, provide the complete name of the school district, school name, and the number of free and reduced-price eligible students from which this site will draw its attendance.	
School District:	School District
School Name:	School Name
Percentage of Enrollment Eligible for Free and Reduced-price Meals:	XX %
If this site is a public school site and another school's data was used to establish eligibility for this site, explain why another school's data was used.	
If census data is the selected eligibility method, enter the following:	
Block Number:	
Group Number:	
Percentage of Needy Children (if known):	%
31. If Restricted Open or Closed-Enrolled is selected as Site Type, provide reason for operating this type of site.	
COVID19	



### School sites that do not have $\geq 50\%$ F/R price meal eligibility:

Search your meal site location in the search box of the [USDA Area Eligibility Map](#) in the upper left. If the location of the site is in a pink shaded area like that shown in the picture below, click on the carrot (circled in blue) to display the GEOID number.



Highlighted in yellow below is the GEOID. Copy and paste the GEOID number to use in the site application information. Note the CBG percentage or Census Tract value  $\geq 50\%$  and report it in the Percentage of Needy Children box in the site application (see picture on page 12).

1 of 1	
CACFP Day Care Home (Tier I) and SFSP Summer Meal Site Eligibility for FY20: 311090018001	
GEOID	311090018001
State	Nebraska
FY 2020 Area Eligible?	YES
CBG: Percentage of children (0-18) eligible for F/RP meals	82.40
CBG: Number of children (0-18) eligible for F/RP meals (Numerator)	70.00
CBG: Total children (0-18) (Denominator)	85.00
Percentage of children (0-12) eligible for F/RP meals	84.60
CBG: Number of children (0-12) eligible for F/RP meals (Numerator)	55.00
CBG: Total children (0-12) (Denominator)	65.00
Census Tract: Percentage of children (0-18) eligible for F/RP meals	85.50
Census Tract: Percentage of children (0-12) eligible for F/RP meals	86.00

(Continue on next page.)



Choose Census Data in #28. Record the date the [USDA Area Eligibility Map](#) was accessed in the eligibility start date box.

Choose School in #29.

Leave School District, Site Name and percent value of students eligible for F/R meals in #30 blank.

Paste the copied GEOID from the [USDA Area Eligibility Map](#) into Block Number and Group Number in #30. Record the percent value reported in the CBG or Census Tract of the Area Eligibility map.

Answer #31 with "COVID19."

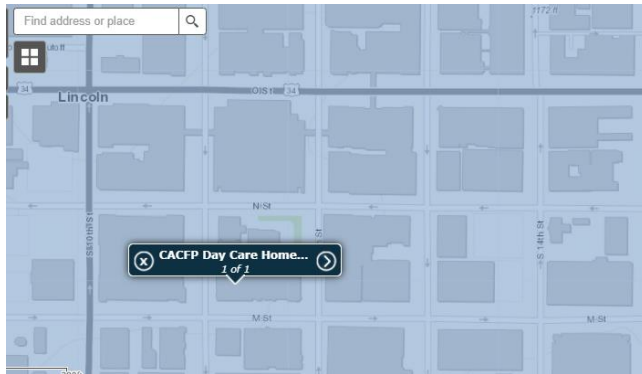
Do not answer #32 or #33.

Site Type	
Indicate the Site Type, the Eligibility Method, and the Primary Service provided by this site.	
27. Site Type:	<input type="text" value="Restricted Open"/>
28. Eligibility Method:	<input type="text" value="Census Data"/>
For School Data or Census Data Eligibility Methods, indicate the Start Date.	
Eligibility Data - Start date:	<input type="text" value="10/1/2020"/>
Eligibility Data - Expiration date:	<input type="text" value="09/30/2023"/>
29. Primary service provided by this site:	<input type="text" value="School"/>
If Service is Other, describe:	
<input type="text"/>	
30. If School Data is selected, provide the complete name of the school district, school name, and the number of free and reduced-price eligible students from which this site will draw its attendance.	
School District:	<input type="text"/>
School Name:	<input type="text"/>
Percentage of Enrollment Eligible for Free and Reduced-price Meals:	<input type="text"/> %
If this site is a public school site and another school's data was used to establish eligibility for this site, explain why another school's data was used.	
<input type="text"/>	
If census data is the selected eligibility method, enter the following:	
Block Number:	<input type="text" value="XXXXXXXXXX"/>
Group Number:	<input type="text" value="XXXXXXXXXX"/>
Percentage of Needy Children (if known):	<input type="text"/> %
31. If Restricted Open or Closed-Enrolled is selected as Site Type, provide reason for operating this type of site.	
<input type="text" value="COVID19"/>	



**School sites that do not have  $\geq 50\%$  F/R price meal eligibility and are NOT located in an eligible area according to the Area Eligibility Map:**

Search your meal site location in the search box of the [USDA Area Eligibility Map](#) in the upper left. If the location of the site is in a blue shaded area like that shown in the picture below, it is not area eligible.



These sites will use Nebraska's state-wide Area Eligibility waiver to operate Open or Restricted Open SFSP sites.

Choose Census Data in #28.

Choose School in #29.

Leave School District, Site Name and percent value of students eligible for F/R meals in #30 blank.

Record "COVID19" in both Block Number and Group Number in #30. Leave the percent value box blank.

Answer #31 with "COVID19."

Do not answer #32 or #33.

(See picture on page 14.)



Site Type	
Indicate the Site Type, the Eligibility Method, and the Primary Service provided by this site.	
27. Site Type:	<input type="text" value="Restricted Open"/>
28. Eligibility Method:	<input type="text" value="Census Data"/>
For School Data or Census Data Eligibility Methods, indicate the Start Date.	
Eligibility Data - Start date:	<input type="text" value="10/1/2020"/>
Eligibility Data - Expiration date:	<input type="text" value="09/30/2023"/>
29. Primary service provided by this site:	<input type="text" value="School"/>
If Service is Other, describe:	
<input type="text"/>	
30. If School Data is selected, provide the complete name of the school district, school name, and the number of free and reduced-price eligible students from which this site will draw its attendance.	
School District:	<input type="text"/>
School Name:	<input type="text"/>
Percentage of Enrollment Eligible for Free and Reduced-price Meals:	<input type="text"/> %
If this site is a public school site and another school's data was used to establish eligibility for this site, explain why another school's data was used.	<input type="text"/>
If census data is the selected eligibility method, enter the following:	
Block Number:	<input type="text" value="COVID19"/>
Group Number:	<input type="text" value="COVID19"/>
Percentage of Needy Children (if known):	<input type="text"/> %
31. If Restricted Open or Closed-Enrolled is selected as Site Type, provide reason for operating this type of site.	
<input type="text" value="COVID19"/>	

(Continue on next page.)



Ensure selected meal types in #34 are correct. The SFSP allows schools to serve breakfast or lunch, or breakfast + lunch, or one main meal and snack each day.

Make sure answers in questions #35, #37, #38, #39 and #40 are correct based on how you intend to operate the program under normal meal service. Answer "No" to #36.

**Site Operation**

34. Check meal type(s) to be served at this site:

☐ Breakfast

☐ AM Snack

☐ Lunch

☐ PM Snack

☐ Supper

35. Indicate your system for serving meals to attending children:

☐ Cafeteria Style

☐ Unitized meal

☐ Family Style (Available to camp sites only)

☐ Offer vs. Serve

☐ Other (provide explanation)

36. Indicate if this is an outdoor or mobile site?

☐ Yes

☒ No

37. Indicate how the site supervisor will communicate the number of meals that will be needed for the following day:

38. Indicate your plan for the receipt and storage of meals before serving to children:

☐ Appropriate holding equipment is not available. Meals will be delivered no earlier than one hour prior to the beginning of meal service.

☐ Appropriate holding equipment is available at site to maintain meals at appropriate temperatures until service.

39. Indicate your plan for the storage or disposal of leftover meals or components:

40. Indicate your plan for serving meals during inclement weather (ex: excessive heat, rain):

Other (provide explanation below):

By making meal type selections in #34, those meal types will become active for modification in the meal service options in #41 through #70 of the site application. An example for Breakfast is shown below.

(Continue on next page.)



Make appropriate selections in #41 and #42.

41. Meal Service Method:

42. Menu Planning Option:

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

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

44. Meal Serving Dates: Start:  End:

45. Meal Times: Start:  :00 End:  :00

46. Average Daily Participation:

The current application will contain information for meals served beginning 10/1/2020 through the end of the 2020-21 school year. Click on the green "Calendar" button; a window will open. Update the end date to reflect the last day of school and select the days of the week that meals have been or will be served. If your school chooses to implement the SFSP after 10/1/2020, please update the start date to accurately reflect your SFSP start date.

**2021 SFSP Site Meal Serving Dates - Breakfast**

**Calendar Options**

Calendar Year: 2021 - 2022

Start: 10/1/2020 End:

Days To Include: ☐ Sun ☒ Mon ☒ Tue ☒ Wed ☒ Thu ☒ Fri ☐ Sat

Days Selected per Month

Click "Update Calendar" and scroll through the calendar window to unselect days that meals were not or will not be served. (See picture on page 17.) Remove days that meals will not be provided by clicking to un-shade them. After ensuring days are correctly removed from the calendar, click the red "Save and Close" button at the top of the calendar window.





October 2020							November 2020							December 2020						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
≥				1	2	3	≥							≥		1	2	3	4	5
≥	4	5	6	7	8	9	≥	1	2	3	4	5	6	≥	6	7	8	9	10	11
≥	11	12	13	14	15	16	≥	8	9	10	11	12	13	≥	13	14	15	16	17	18
≥	18	19	20	21	22	23	≥	15	16	17	18	19	20	≥	20	21	22	23	24	25
≥	25	26	27	28	29	30	≥	22	23	24	25	26	27	≥	27	28	29	30	31	
≥							≥	29	30					≥						

January 2021							February 2021							March 2021						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
≥					1	2	≥	1	2	3	4	5	6	≥	1	2	3	4	5	6
≥	3	4	5	6	7	8	≥	7	8	9	10	11	12	≥	7	8	9	10	11	12
≥	10	11	12	13	14	15	≥	14	15	16	17	18	19	≥	14	15	16	17	18	19
≥	17	18	19	20	21	22	≥	21	22	23	24	25	26	≥	21	22	23	24	25	26
≥	24	25	26	27	28	29	≥	28						≥	28	29	30	31		
≥	31						≥							≥						

April 2021							May 2021							June 2021						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
≥				1	2	3	≥						1	≥		1	2	3	4	5
≥	4	5	6	7	8	9	≥	2	3	4	5	6	7	≥	6	7	8	9	10	11
≥	11	12	13	14	15	16	≥	9	10	11	12	13	14	≥	13	14	15	16	17	18
≥	18	19	20	21	22	23	≥	16	17	18	19	20	21	≥	20	21	22	23	24	25
≥	25	26	27	28	29	30	≥	23	24	25	26	27	28	≥	27	28	29	30		
≥							≥	30	31					≥						

Back on the site application page, click the "Refresh From Calendar" button then wait several seconds and the operation days for each month will populate. Make sure the meal start and end times and Average Daily Participation are correct.

Repeat these steps for each meal service.

**Breakfast**

41. Meal Service Method: Self-Prep - Receives meals (Central Kitchen) ▼

42. Menu Planning Option: SFSP Meal Pattern ▼

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

Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
22	21	19	15	20	20	22	13	0	0	0	0

Refresh From Calendar

44. Meal Serving Dates: Start: 10/01/2020 End: 05/20/2021

45. Meal Times: Start: 8 AM ▼ :00 ▼ End: 9 AM ▼ :00 ▼

46. Average Daily Participation:

(Continue on next page.)



Answer "No" to #71 and "Yes" to #72.

SFSP sites are allowed to serve infants only after receiving permission from NDE Nutrition Services.

Special Meal Pattern and Dietary Needs	
71. Will this site be serving children under age 1 year (infants 0 to 12 months)?	<input type="radio"/> Yes <input checked="" type="radio"/> No
72. Does this site anticipate the need to plan and/or prepare special diets for children with disabilities?	<input checked="" type="radio"/> Yes <input type="radio"/> No

If meals are vended by an SFA, a food production facility must be selected in #73. (See instructions for adding a Food Production Facility on page 6.)

Food Production Facility Information	
73. If meals served at this site are prepared at another facility, identify the name of where meals are prepared. A Food Production Facility form, provided on the Application Packet screen, must be completed to populate the following fields.	
Facility 1:	<input type="text"/>
Facility 2:	<input type="text"/>

Choose applicable outreach methods for #74.

Outreach	
74. Indicate below your Outreach method(s):	
<input type="checkbox"/> Newspaper announcement/press release	
<input type="checkbox"/> TV/Radio	
<input type="checkbox"/> Flyers - neighborhood	
<input type="checkbox"/> Flyers - school	
<input type="checkbox"/> Posters and signs	
<input type="checkbox"/> Sponsor Website	
<input type="checkbox"/> School newspaper	
<input type="checkbox"/> Other	<input type="text"/>

(Continue on next page.)



Visit the [US Census QuickFacts](#) to get information for #75 and #77. Small communities' information is not accessible in the system; data will be reported based on county information, which is available from the QuickFacts. See example below.

### How to use the US Census QuickFacts:

Search using the search bar in the upper left. *Remember to search by county if your town/city does not produce results in the QuickFacts.*

The data for your town/city/county (see orange box in picture below) will appear in the column closest to the reported percentages for Race and Hispanic Origin (see blue box in picture below).

Table

All Topics	Hamilton County, Nebraska	United States
Population estimates, July 1, 2019, (V2019)	9,324	328,239,523
<b>PEOPLE</b>		
<b>Population</b>		
Population estimates, July 1, 2019, (V2019)	9,324	328,239,523
Population estimates base, April 1, 2010, (V2019)	9,114	308,758,105
Population, percent change - April 1, 2010 (estimates base) to July 1, 2019, (V2019)	2.3%	6.3%
Population, Census, April 1, 2010	9,124	308,745,538
<b>Age and Sex</b>		
Persons under 5 years, percent	6.6%	6.0%
Persons under 18 years, percent	24.1%	22.3%
Persons 65 years and over, percent	20.4%	16.5%
Females persons, percent	49.5%	50.8%
<b>Race and Hispanic Origin</b>		
White alone, percent	97.7%	76.3%
Black or African American alone, percent (a)	0.5%	13.4%
American Indian and Alaska Native alone, percent (a)	0.3%	1.3%
Asian alone, percent (a)	0.4%	5.9%
Native Hawaiian and Other Pacific Islander alone, percent (a)	0.2%	0.2%
Two or More Races, percent	1.2%	2.8%
Hispanic or Latino, percent (b)	3.9%	18.5%
White alone, not Hispanic or Latino, percent	94.1%	60.1%

Use the values reported for your county to complete the information in #75 (see purple box in picture on page 20). Report the percentage values in #75 in whole numbers (no decimal values) to make the total of the Ethnicity Data values equal 100%.

Report the school site's Ethnicity Data in #76 (see green box in picture on page 20) so that the two values are equal to the site's enrollment or average daily participation.



Ethnicity Data	
75. Geographic Area (enter percentages):	
Hispanic:	<input type="text"/> %
Non-Hispanic:	<input type="text"/> %
76. Participation Area (enter participants):	
Hispanic:	<input type="text"/> 0.00 %
Non-Hispanic:	<input type="text"/> 0.00 %

Use the QuickFacts values reported for your county to complete the information in #77 (see purple box in picture below). Report the percentage values in #77 as whole numbers (no decimal values) to make the total of the five Racial Data values equal 100%. Some values maybe zero.

In #78 (see green box in picture below), enter the number of the school building's enrolled students who belong in each racial category. The total of all five values entered in #78 should be equal to the site's enrollment or average daily participation (and should be the same total in #76).

Racial Participation Data	
77. Geographic Area (enter percentages):	
American Indian or Alaskan Native:	<input type="text"/> %
Asian:	<input type="text"/> %
Black or African American:	<input type="text"/> %
Native Hawaiian or Pacific Islander:	<input type="text"/> %
White:	<input type="text"/> %
78. Participation Area (enter participants):	
American Indian or Alaskan Native:	<input type="text"/> 0.00 %
Asian:	<input type="text"/> 0.00 %
Black or African American:	<input type="text"/> 0.00 %
Native Hawaiian or Pacific Islander:	<input type="text"/> 0.00 %
White:	<input type="text"/> 100.00 %

Answer #79 and #80.

Add any supporting comments that will help Nutrition Services understand your meal service (i.e., if it is operating using any available meal service waivers for meal service times, non-congregate, parent pick-up, etc.).

Select "Save" and "Finish" when prompted. If the application is saved with errors, edit the application to fix the errors before moving on. The Budget Detail will not populate correctly if the site application has errors.



**Miscellaneous**

79. Does this site participate in the USDA Special Milk Program?    ☐ Yes    ☒ No

80. Activities at Site

☐ Recreational Program
☐ Summer School
☐ Cultural
☐ No Organized Activities
☐ Other (provide explanation)

**Comments from Sponsor**

Created By: sFriesz on: 9/10/2020 12:26:56 PM    Modified By: sFriesz on: 9/10/2020 12:26:58 PM

Save
Cancel

Complete the steps on pages 8 through 21 for each site application.

Click “Back” at the bottom of the site list to return to the Application Packet page.

Click “Add” on the Budget Detail.

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>	➔ Sponsor Application	Original	Pending Validation
<a href="#">Add</a>	➔ Budget Detail		
<a href="#">Details</a>	➔ Food Production Facility List (5)		
<a href="#">Details</a>	Site Field Trip List		
<a href="#">Details</a>	Checklist Summary		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78

< Back
Submit for Approval
Withdraw Packet

(Continue on next page.)



## Budget Detail

The Operating Reimbursement and Administrative Reimbursement amounts are calculated in the CNP system and values are automatically filled into these sections.

Operating Reimbursement			
Meal	# of Sites	Total Meals	Total
Breakfast	0	0	\$0.00
Lunch	1	2,420	\$9,099.20
Snack	0	0	\$0.00
Supper	0	0	\$0.00
Sub Total			\$11,204.60
Administrative Reimbursement			
Meal	# of Sites	Total Meals	Total
Breakfast	0	0	\$0.00
Lunch	1	2,420	\$949.85
Snack	0	0	\$0.00
Supper	0	0	\$0.00
Sub Total			\$1,210.00

Estimate projected operating costs and report those in the appropriate line items. Not all line items will have values to report. When estimating costs, take into account the total amount of reimbursement the program is estimated to receive above. Please estimate costs to match total reimbursement calculated. There should not be an excessive gap between the total reimbursement and costs.

Projected Operating Costs		
Food:		\$
Non Food Supplies:		\$
Contracted Food Costs:		\$
Food Service Labor:		\$
Rent/Utilities:		\$
Equipment Rental:		\$
Transportation of Food:	Rate per mile: <input type="text"/>	\$
Sub Total		\$0.00

(Continue on next page.)



Estimate the projected administrative costs. Provide the indirect cost rate only if utilized by the SFA.

Projected Administrative Costs		
Administrator:		\$
Monitor:		\$
Secretary/Bookkeeper		\$
Printing, Mail, Phone:		\$
Office Supplies:		\$
Transportation:	Rate per mile: <input type="text"/>	\$
Indirect Costs Percent:	<input type="text"/> %	\$0.00
Indirect Cost:		\$
Audit Costs:		\$
Sub Total		\$0.00

Total SFSP Costs will populate based on Operational and Administrative costs reported above. The Total SFSP Reimbursement also populates from the Operating and Administrative Reimbursement sections at the top.

Total SFSP reimbursement must be greater than or equal to Total SFSP Costs.

Cost Reimbursement Summary	
Total SFSP Costs	\$0.00
Total SFSP Reimbursement	\$12,414.60
Excess SFSP revenue amount from the prior program year or previous participation in SFSP	<input type="text"/> \$
Amount from other funding resources (e.g. grant, donations)	<input type="text"/> \$
Other funding resources	<input type="text"/>
Balance	\$12,414.60

Report the adult meal price(s). The adult meal price(s) used during normal school meals operation (NSLP & SBP) can be in the SFSP as well.

Adult Meal Information	
Will meals be sold to adults?	<input type="radio"/> Yes <input type="radio"/> No
If Yes, Price Charged for	
Lunch	\$ <input type="text"/> 0.00
Breakfast	\$ <input type="text"/> 0.00
Snack	\$ <input type="text"/> 0.00
Supper	\$ <input type="text"/> 0.00

(Continue on next page.)



Report how excess funds will be used. It is allowable to use excess SFSP funds in another USDA Child Nutrition Program (e.g. NSLP, CACFP).

Click "Save" at the bottom. You will be directed to the Application Packet page.

**Misc.**

Identify how excess funds will be used:

☐ Used to improve the meal service or other aspects of the SFSP

☐ Kept for next year's SFSP operations

☐ Pay for allowable costs of the other child nutrition programs

Is there a rental agreement, lease, or contract associated for any of the non-food costs listed above? ☐ Yes ☐ No

If the Checklist Summary has a red arrow, access it to upload required documents and mark the boxes to indicate those documents have been submitted to NDE. Documents do not need to be uploaded if the Checklist Summary does not have a red arrow.

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>	✓ Sponsor Application	Original	Not Submitted
<a href="#">View</a>   <a href="#">Modify</a>	✓ Budget Detail	Original	Pending Approval
<a href="#">Details</a>	Food Production Facility List		
<a href="#">Details</a>	Site Field Trip List		
<a href="#">Details</a>	➔ Checklist Summary (1)		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78


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## Checklist Summary

If items are required for submission, site name(s) will appear in blue, clickable hyperlinks. Click on the hyperlinked words and view the list of requested items. Attach the items by clicking the blue paperclip and mark the box that verifies each document was submitted. Finally, click "Save" and "Finish." (See picture on page 25.)





Required Forms/Documents to submit to NDE	Document Submitted to NDE	Date Submitted to NDE	Document on File w/NDE	Status	Status Date	Last Updated By
Organization-Wide Audit	 <input checked="" type="checkbox"/>	<input type="text" value="10/21/2020"/>	<input type="checkbox"/>	Pending Approval	10/21/2020	.....




  

Action	Checklist Item	Comment	Attachment Date/Time
There are no attachments			

Navigate back to the Application Packet by clicking "Back" at the bottom of the Checklist Summary page.

### Submitting the Application Packet

If everything is completed correctly, the red arrows are replaced with green checkmarks and the "Submit for Approval" button will activate and turn red. Click the "Submit for Approval" button.

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>	 Sponsor Application	Original	Not Submitted
<a href="#">View</a>   <a href="#">Modify</a>	 Budget Detail	Original	Pending Approval
<a href="#">Details</a>	Food Production Facility List		
<a href="#">Details</a>	Site Field Trip List		
<a href="#">Details</a>	 Checklist Summary (1)		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	78	0	0	0	0	78