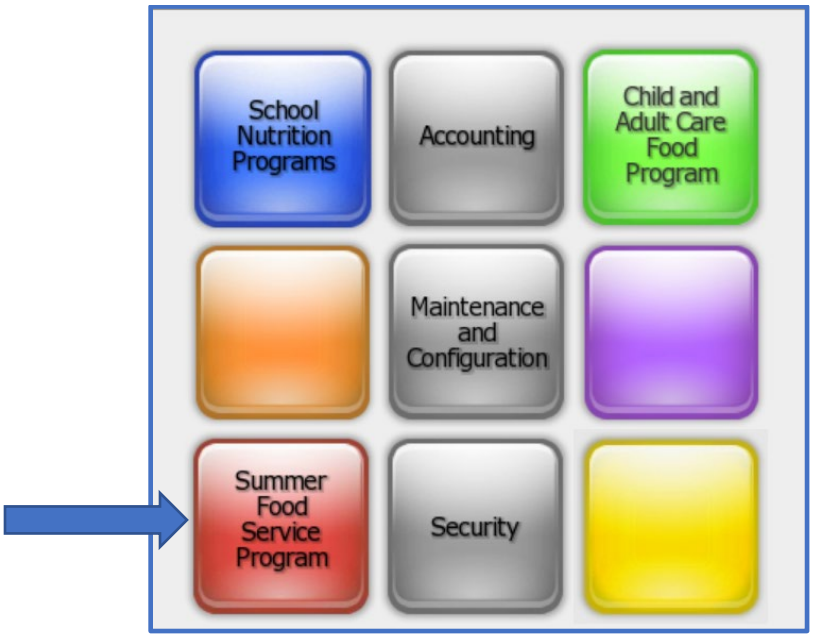
SFSP Application Guide

Updated April 9, 2021

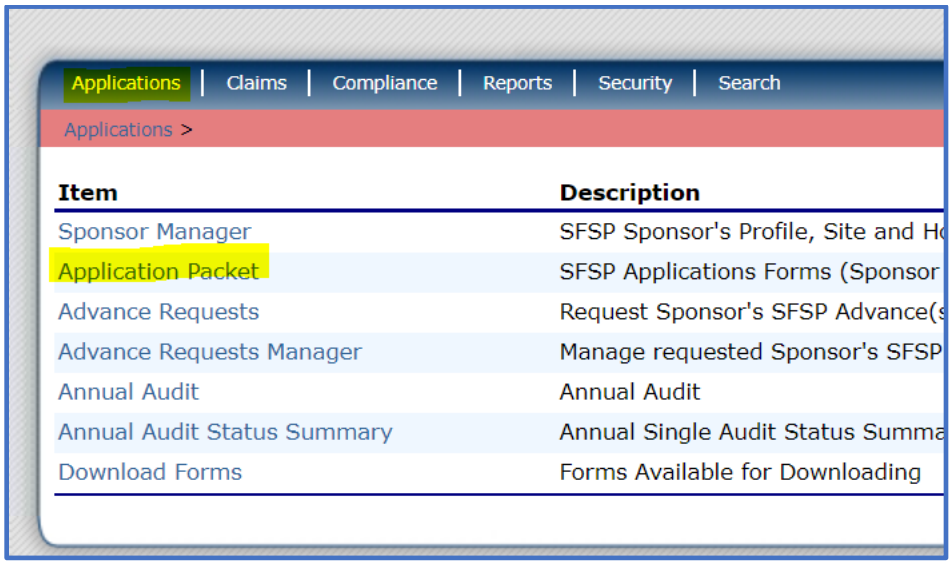
Please print this guide in color

Access the SFSP application by logging in at: https://nutrition.education.ne.gov.

Click on the red Summer Food Service Program box in the lower left as shown in the picture below.



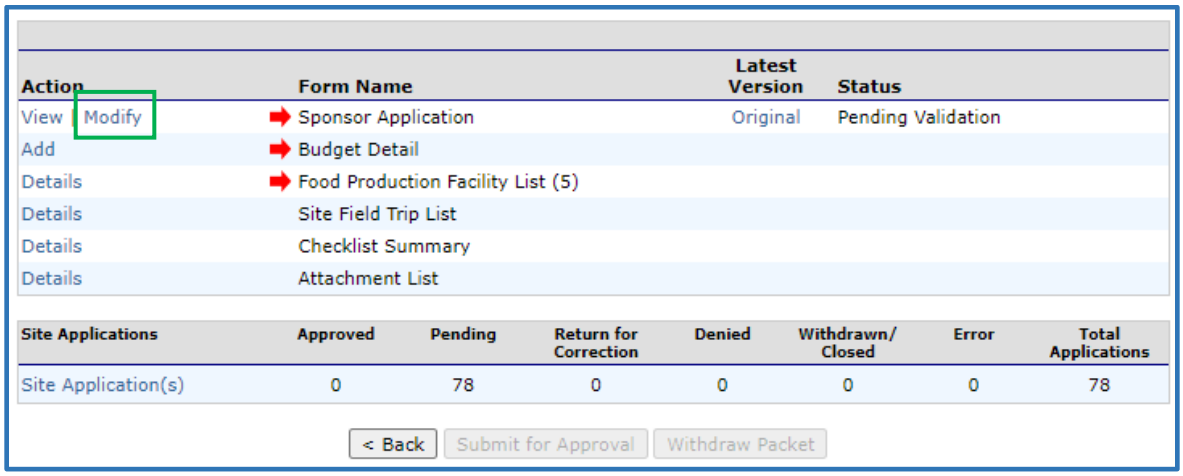
Click on "Applications" in the upper left. Then, select "Application Packet" from the list of items displayed.



Select the appropriate program year; click the red "Enroll" button.

The application packet page will appear. Complete the items on the page in this order:

1. Sponsor Application;
2. Food Production Facility List *ONLY* if school has vendor agreement to receive meals from another SFA.
3. Site Application(s);
4. Budget Detail;
5. Checklist Summary



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Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications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

Sponsor Application

Complete the sponsor application fields for street and mailing address, and Program Contact, and Authorized Representative. If one of these positions participated in SFSP training, mark the box in #14 and/or #23 and provide the training date of 10/1/2020.

If neither the Program Contact nor Authorized Representative participated in training, indicate the staff member who did attend in #24, and report the date 10/1/2020 in #25.

Provide answers to questions #26-30 shown in the picture below. Record "NSLP" in #28.

For schools that receive $750,000 in federal funds (e.g. reimbursement from NSLP or other Federal grant programs), answer "Yes" to #29. "Yes" will trigger the Checklist Summary to require uploading of your school's most recent audit report. (See picture on page 3.)

General Questions

26. Does your agency provide year round public services to the community(ies) other than operating the SFSP? (●) Yes ( ) No

If **No**, which of the following circumstances supports your need to operate SFSP?

If **Other**, please describe.

27. Indicate meal count procedures (Check all that apply)

[x] Count each complete meal as it is served

[ ] Other

If **Other**, please describe.

28. List any federal agency providing financial support to your agency or enter "None": School receives funds from NSLP

29. Did your organization receive more than $750,000.00 in federal funds in your last fiscal year? (●) Yes ( ) No

If Yes, list ending month of Sponsor Fiscal year:

If Yes, 'Organization-Wide Audit' documentation is required.

30. Will Sponsor use CACFP meal pattern (226.20) for children ages 1-6? ( ) Yes (●) No

Answer "Yes" in #26.

Choose "Count each complete meal as it is served in #27.

Record "NSLP" in #28.

Your answer to #29 could be "No" if your school doesn't receive $750,000 annually.

Answer "No" to #30.

In Reporting Requirements:

- provide the zip code + 4 digits for the physical address for your school; and
- report the most recent renewal date of your school's DUNS (this number cannot be more than 12 months old).

Check the confirmation box.

Reporting Requirements

Dun and Bradstreet Data Universal System Number (nine (9) digit DUNS Number):

Click here 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:

Click www.usps.com to verify the zip code + 4.

Date the Registration was completed or renewed:

Sponsors are strongly encouraged to maintain a copy of the confirmation email received from SAM Registration.

[x] 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.

(Continue on next page.)

Complete questions #31a, #31b and #31d; then, check the certification box for #32. Click "Save" at the bottom.

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? (●) Yes ( ) No

NOTE: Principal 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.

Publicly funded 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? ( ) Yes (●) No

If yes, answer question c.

c. Were the violations corrected and eligibility restored, including payments of debts owed? ( ) Yes ( ) 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? ( ) Yes (●) No

NOTE: A lack of business integrity 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. [x] 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.

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.

(Continue on next page.)

Select "Details" of the Food Production Facility List in the Application Packet page. Then, choose "**Add Facility**":

Found: 0

Action	Facility Name	Status
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:

(Continue on next page.)

Complete the Vended Facility Information section as you see below. Provide your specific information for #10, #13 and #14. "Save" at the bottom and navigate back to the Application Packet page.

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.

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.

- ○ I will be using state agency's Invitation For Bid and contract (FNS 688)
- ◉ I am exempt from competitive bidding and will use a simple written agreement
- ○ I have received state agency approval to use an alternate form

12. Is the Sponsor extending the Food Service Management Company (FSMC) contract for which it went out for bid?

- ○ Yes
- ○ No
- ◉ N/A

13. Contract Start Date:

14. Contract End Date:

15. Number of renewal years specified in the contract: 0

16. Current extension number: 0

Created By: on: 10/22/2020 2:21:05 PM Modified By: on: 10/22/2020 2:30:15 PM

Save Cancel

Site Application

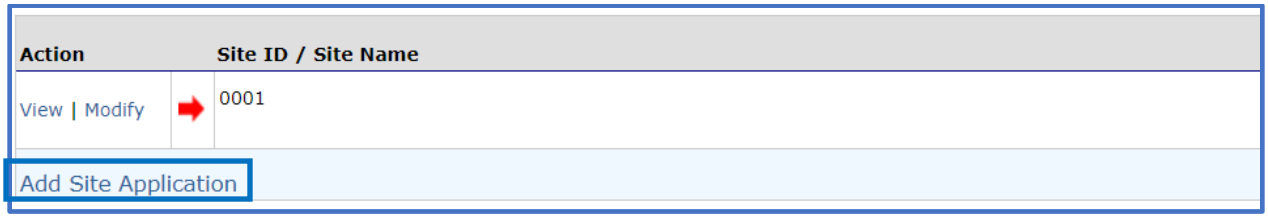
Access the site application by clicking on your school name under "Site Application(s)" in the green box in the Application Packet page pictured below.

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
View | Admin	Sponsor Application	Original	Not Submitted
View | Admin	Budget Detail	Original	Pending Validation
Details	Food Production Facility List (1)		
Details	Site Field Trip List		
Details	Checklist Summary (1)		
Details	Application Packet Notes		
Details	Attachment List		

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

If your school is new to the SFSP "Add Site Application" in the bottom left (see below). A list of available sites will appear.

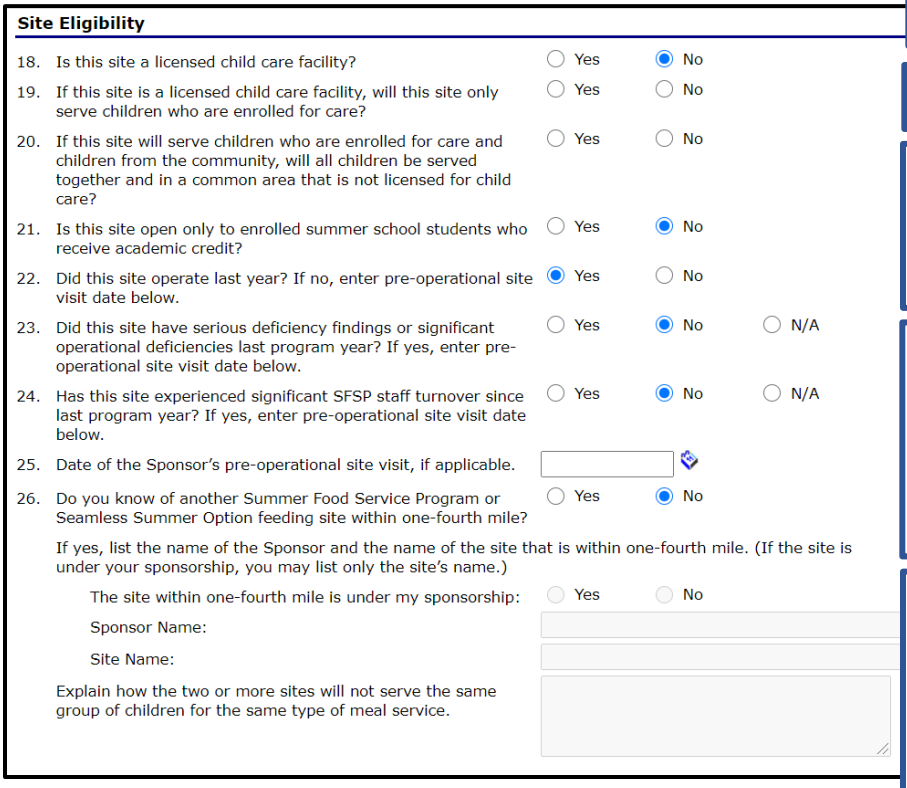


After all sites have been added, click "Modify" under "Action."

Complete questions #1 through #15 with information about the school and personnel.

For a site that has not operated the SFSP in the past, answer the following questions as shown below:

**The pre-approval date should be 4/1/2021. Pre-approval visit requirements have been waived for the SFSP and this visit does not need to be conducted; however, a date must be entered in the application.*



Site Eligibility

18. Is this site a licensed child care facility? ○ Yes ◉ No
19. If this site is a licensed child care facility, will this site only serve children who are enrolled for care? ○ Yes ○ 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? ○ Yes ○ No
21. Is this site open only to enrolled summer school students who receive academic credit? ○ Yes ◉ No
22. Did this site operate last year? If no, enter pre-operational site visit date below. ◉ Yes ○ 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. ○ Yes ◉ No ○ N/A
24. Has this site experienced significant SFSP staff turnover since last program year? If yes, enter pre-operational site visit date below. ○ Yes ◉ No ○ N/A
25. Date of the Sponsor's pre-operational site visit, if applicable.
26. Do you know of another Summer Food Service Program or Seamless Summer Option feeding site within one-fourth mile? ○ Yes ◉ 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: ○ Yes ○ No

Sponsor Name:

Site Name:

Explain how the two or more sites will not serve the same group of children for the same type of meal service.

Do not answer #19 or #20.

Answer "No" to #21.

If your school operated the SFSP in the past, answer #23 and #24 "No."

If your organization did not operate the SFSP in 2019-20, answer #22 "No" and enter 4/1/2021 in #25.

If the site operates within ¼ mile of another SFSP site, answer "Yes" to #26 and provide this explanation: "serves school's students."

(Continue on next page.)

If your school intends to serve **only enrolled students/participants** and not all community children ages 1 – 18 years, select one of the **Closed Enrolled** options in #27 (see below).

If your school intends to provide meals to all community children ages 1 – 18 years, choose **Open** in #27.

Please verify site eligibility by using one of the options below, which are listed in priority order.

Priority 1: site is located in attendance area of a school with ≥50% Free or Reduced price meal eligibility based on SY19-20 eligibility information (see green heading below); or

Priority 2: site is located in an eligible area based on census information (see blue heading on page 9); or

Priority 3: neither Priority 1 nor Priority 2 are applicable, and the site will use the USDA's Area Eligibility Waiver to qualify (see purple heading on page 11).

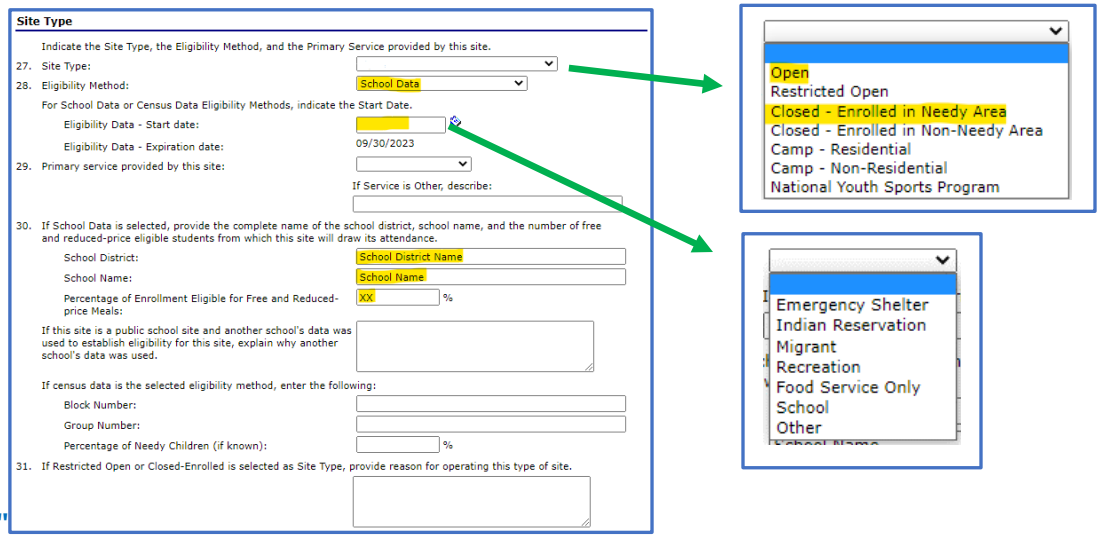
Priority 1: site is located in attendance area of a school with >50% Free or Reduced price meal eligibility based on SY19-20 eligibility information

Refer to gray box at top of page 8 to answer #27. Choose School Data in #28. Enter the claim month in which ≥50% of students were eligible for F/R price meals in "Eligibility Data – Start Date."

Make the appropriate selection 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.

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

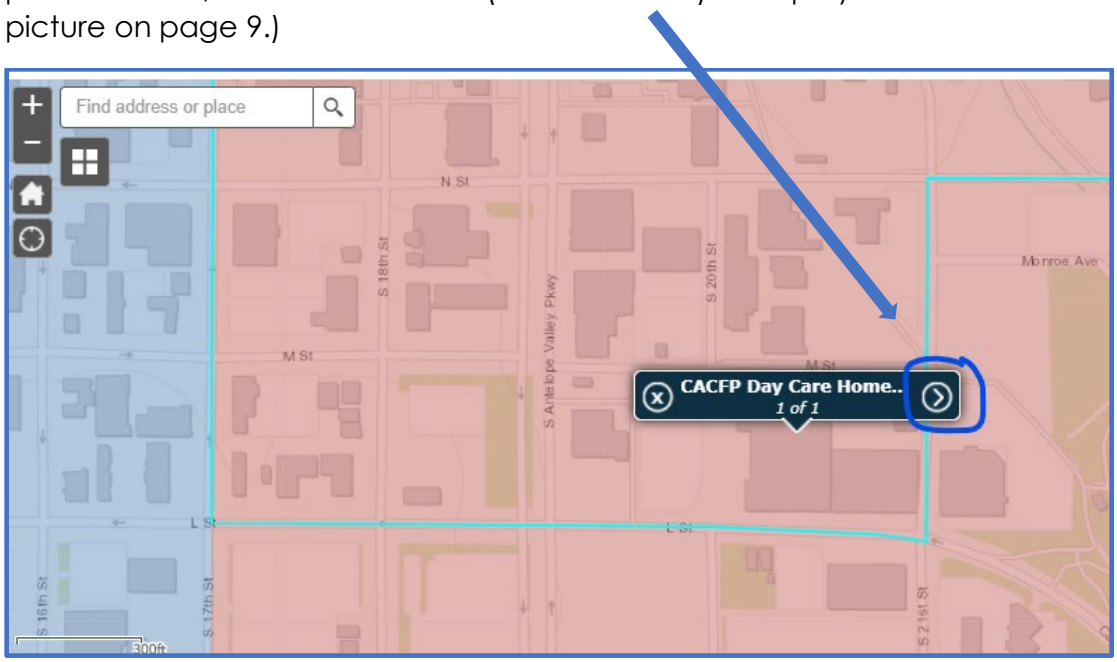
Answer #31 if site type is Closed-Enrolled in Needy Area. Do not answer #32 and #33.



Priority 2: site is located in an eligible area based on census information

Visit the USDA Area Eligibility Map to determine if your meal service site is in an eligible area. Locations in pink shaded areas ARE area eligible.

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. (See picture on page 9.)



The GEOID is highlighted in yellow in the picture below. Copy and paste the GEOID number to use in the site application information. Note the CBG percentage or Census Tract value ≥50% and report it in the Percentage of Needy Children box in the site application (see below).

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

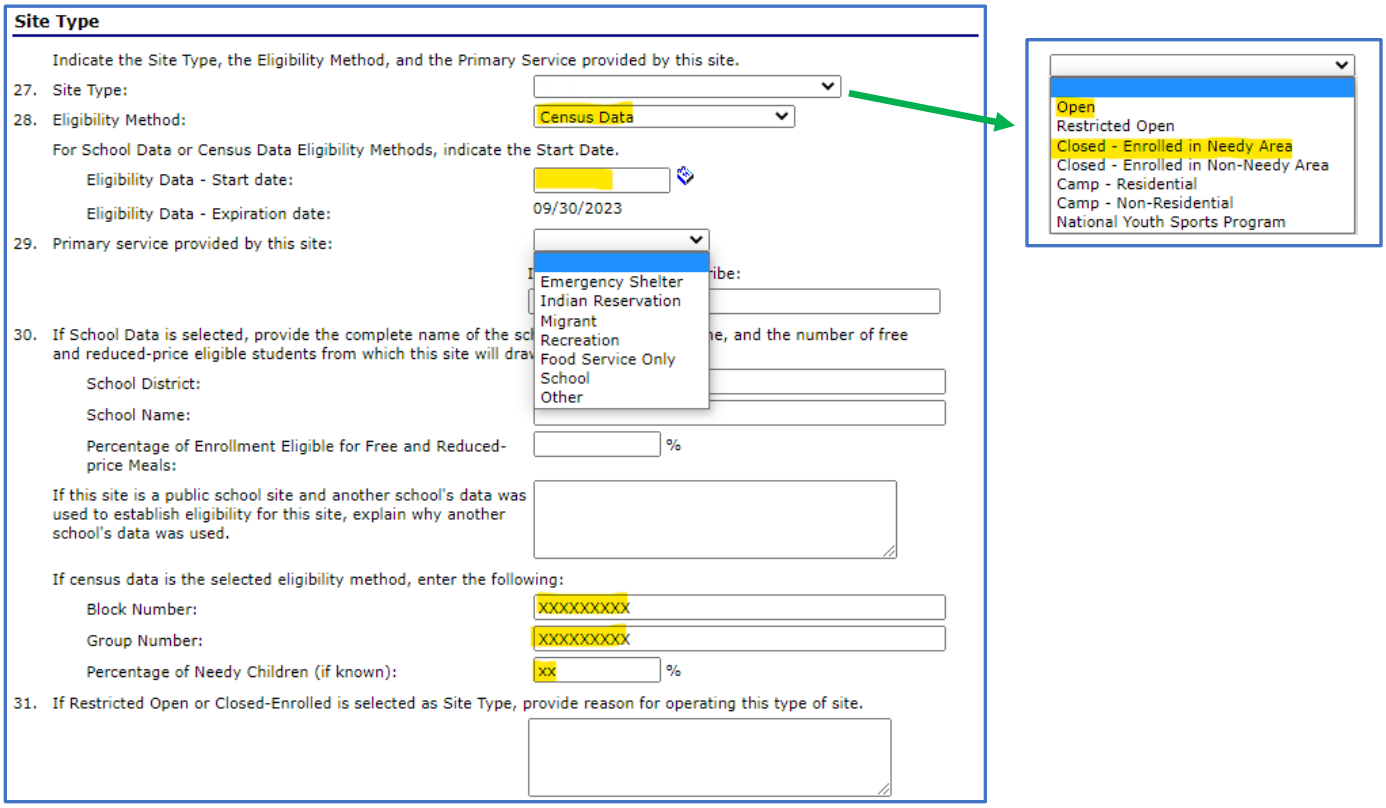
(See picture on page 10.)

Refer to gray box at top of page 8 to answer #27. Choose Census Data in #28. Record the date the USDA Area Eligibility Map was accessed in the "Eligibility Start Date" box.

Make the appropriate selection 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 if site type is Closed Enrolled. Do not answer #32 and #33.

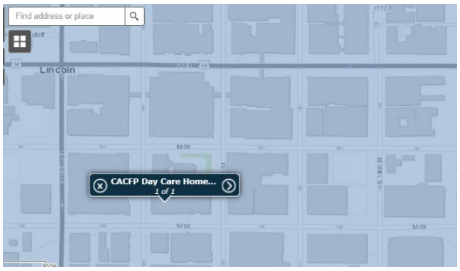


(Continue on next page.)

Priority 3: Neither Priority 1 nor Priority 2 are applicable, and the site will use the USDA's Area Eligibility Waiver to qualify

Visit the USDA Area Eligibility Map to determine if your meal service site is in an eligible area. Locations in pink shaded areas are eligible by census data; blue shaded areas are not eligible by census data.

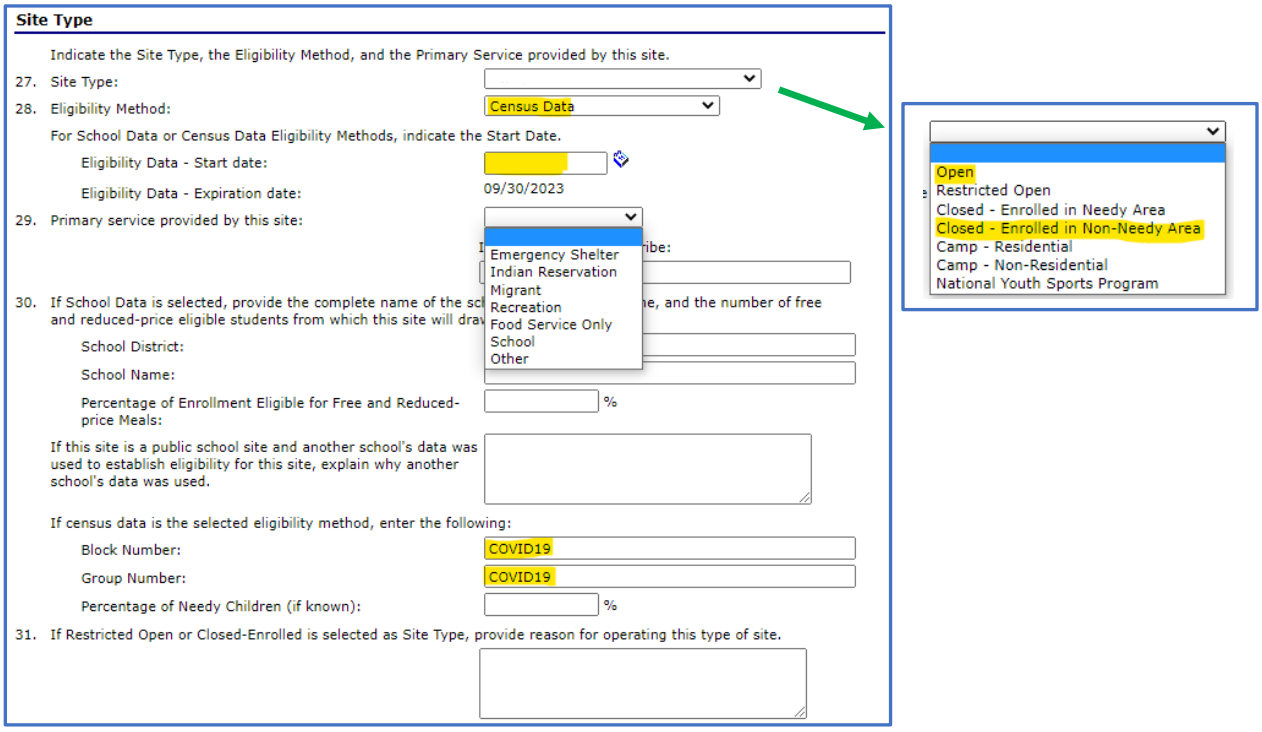
Search your meal site location in the search box of the USDA Area Eligibility Map in the upper left. If the location of the site is in a blue shaded area like that shown in the picture below, it is not area eligible. Follow the site information instructions below.



Refer to gray box at top of page 8 to answer #27. Choose Census Data in #28 and write today's date in "Eligibility Data – Start Date." Make the appropriate selection 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 if site type is Closed-Enrolled in Non-Needy Area. Do not answer #32 and #33.



Select the meal types you will be offering through the SFSP in #34. The SFSP allows schools to serve breakfast or lunch, or breakfast + lunch, or one main meal and snack each day.

Make appropriate selections in #35, #36, #37, #38, #39 and #40.

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.

Make appropriate selections in #41 and #42.

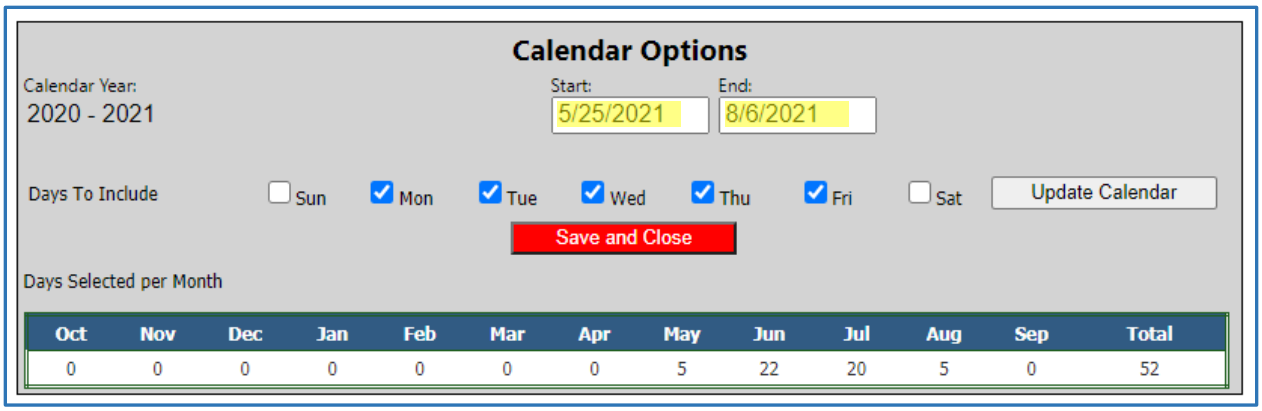
41. Meal Service Method:
42. Menu Planning Option:
43. Click 'Calendar' to select the Meal Serving Dates: Calendar

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

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 during the summer months of 2021. Click on the green "Calendar" button; a window will open (see picture on page 13)



Enter the start and end dates for your summertime meal service, mark the days of the week for which meals will be provided, and then click "Update Calendar." Scroll through the calendar window to unselect days that meals will not be served. (See picture below.) Remove days that meals will not be provided by clicking to un-shade those days on the calendar. After ensuring days are correctly removed from the calendar, click the red "**Save and Close**" button at the top of the calendar window.

(Continue on next page.)

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. The meal's Average Daily Participation is an estimate of the number of participants/children who will be served that meal type.

Repeat these steps for each meal service.

Breakfast

41. Meal Service Method: Self-Prep - Prepares on site
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
0	0	0	0	0	0	0	5	22	20	5	0

Refresh From Calendar

44. Meal Serving Dates: Start: 05/25/2021 End: 08/06/2021
45. Meal Times: Start: 8 AM :00 End: 9 AM :00
46. Average Daily Participation: 1134

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

Special Meal Pattern and Dietary Needs

71. Will this site be serving children under age 1 year (infants 0 to 12 months)? ○ Yes ● No
72. Does this site anticipate the need to plan and/or prepare special diets for children with disabilities? ● Yes ○ No

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

If your meals are vended by an SFA, a food production facility must be selected in #73. *(See instructions for adding a Food Production Facility list on page 4.)*

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:

Facility 2:

(Continue on next page.)

Choose applicable outreach methods for #74.

Outreach

74. Indicate below your Outreach method(s):

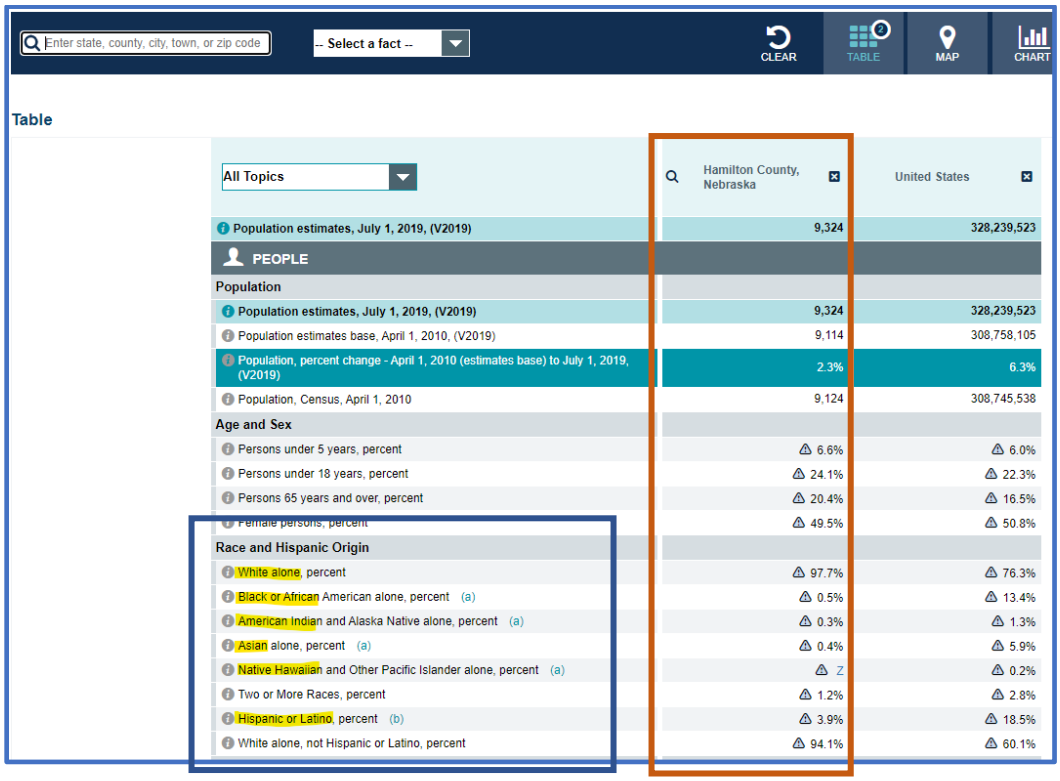
- [ ] Newspaper announcement/press release
- [ ] TV/Radio
- [ ] Flyers - neighborhood
- [ ] Flyers - school
- [ ] Posters and signs
- [ ] Sponsor Website
- [ ] School newspaper
- [ ] Other _____

Visit the US Census QuickFacts to get information for #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).



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

Report the site's Ethnicity Data in #76 so that the two values are equal to the site's anticipated average daily attendance.

(Continue on next page.)

Ethnicity Data

75. Geographic Area (enter percentages):

Hispanic:		%
Non-Hispanic:		%

76. Participation Area (enter participants):

Hispanic:		0.00 %
Non-Hispanic:		0.00 %

Use the values reported for your county's QuickFacts data to complete the information in #77 (see purple box in picture on page 17). Report the percentage values as whole numbers (no decimals) to make the total of the Racial Data values equal 100%.

In #78 (see green box in picture below), report the estimated number of participants who belong in each racial category. The total of all five values entered in #78 should equal the total number entered in #76.

Racial Participation Data

77. Geographic Area (enter percentages):

American Indian or Alaskan Native:		%
Asian:		%
Black or African American:		%
Native Hawaiian or Pacific Islander:		%
White:		%

78. Participation Area (enter participants):

American Indian or Alaskan Native:		0.00 %
Asian:		0.00 %
Black or African American:		0.00 %
Native Hawaiian or Pacific Islander:		0.00 %
White:		100.00 %

(Continue on next page.)

Answer #79 and #80.

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)

Add Comments from Sponsor to share information about your meal service, including how the site is implementing available waivers, if any, and how meals will be counted. Click "**Save**".

Comments from Sponsor

Curbside meals are distributed on Monday (2 days meals) and Wednesday (3 days meals). Additionally meals are provided in the cafeteria and classrooms.

Created By: Modified By:

Save Cancel

Complete the steps on pages 6 through 18 for each SFSP site.

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
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

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(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:	$
	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:	$
Indirect Costs Percent:	%	$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	$
Amount from other funding resources (e.g. grant, donations)	$
Other funding resources	
Balance	$12,414.60

Report the adult meal price(s). The adult meal price(s) must be set at values close to SFSP reimbursement. NDE suggests adult meal prices of $2.00 - $2.50 for breakfast and $4.00 - $4.50 for lunch.

Adult Meal Information

Will meals be sold to adults? ◯ Yes ◯ No

If Yes, Price Charged for

Lunch	$ 0.00
Breakfast	$ 0.00
Snack	$ 0.00
Supper	$ 0.00

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
View | Modify	✔ Sponsor Application	Original	Not Submitted
View | Modify	✔ Budget Detail	Original	Pending Approval
Details	Food Production Facility List		
Details	Site Field Trip List		
Details	➡ Checklist Summary (1)		
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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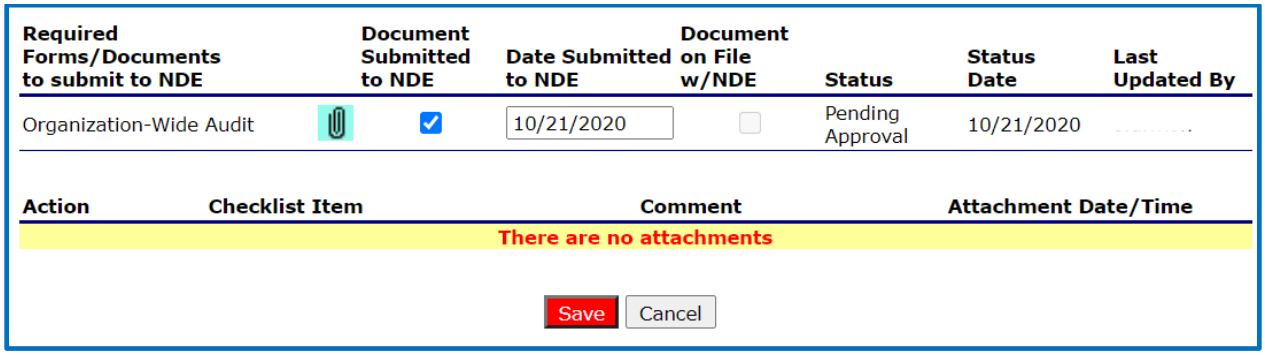
(Continue on next page.)

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. (See picture below.) Finally, click "**Save**" and "**Finish**". Navigate back to the Application Packet by clicking "**Back**" at the bottom of the Checklist Summary page.



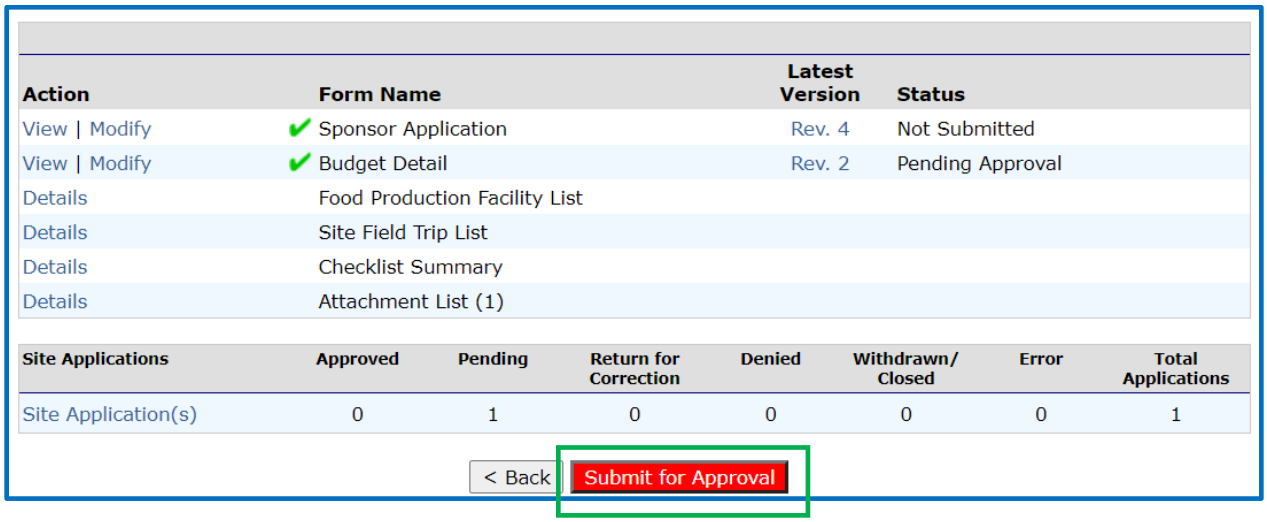
Required Forms/Documents to submit to NDE		Document Submitted to NDE	Date Submitted to NDE	Document on File w/NDE	Status	Status Date	Last Updated By
Organization-Wide Audit		☑	10/21/2020	☐	Pending Approval	10/21/2020	

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

Save Cancel

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
View | Modify	✔	Sponsor Application	Rev. 4	Not Submitted
View | Modify	✔	Budget Detail	Rev. 2	Pending Approval
Details		Food Production Facility List		
Details		Site Field Trip List		
Details		Checklist Summary		
Details		Attachment List (1)		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Site Application(s)	0	1	0	0	0	0	1

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