COVID-19
Meal Pattern Waiver

Organization:	
Agreement #.	

COVID-19

Meal Pattern Waiver		
Check all programs applicable to th	is waiver request:	
SBP NSLP	SSO SFSP	CACFP
This waiver will apply to all sites ap	proved on the online application.	
YES	NO NO	
Date of substitution:	Component(s) to be Waived:	
If no is checked, list sites below the	at will be affected.	
Site Name (match online app.)	Date(s) Component NOT Provided	Component NOT Provided
Sponsor will maintain a record	of all components used as subst	itutions of the required
•	ll be made available for ALSDE u	•
Sponsoring Organization Official Re *Electronic Signature is Acceptable		Date
Return to the following depending	on your program:	

Consistent with section 2202(a)(2) of the Act, this waiver is automatically available to all States that elect to use it, without further application. State agencies operating programs under 7 CFR 210; 220; 225; and 226, must inform their Regional Office if they elect to be subject to the waiver. However, in order to participate under this waiver, local Program operators must contact the State agency for approval to utilize this waiver. This waiver is effective immediately and remains in effect until April 30, 2020 or until expiration of the federally declared public health emergency, whichever is earlier.

Date created: 3/26/2020

CACFP/SFSP: dturk@alsde.edu

NSLP/SBP/SSO: jragan@alsde.edu