

2020-2021 Permanent CNP Application/Agreement & Policy Statement

LEA: _____

Dates Received: _____ Entered: _____ Approved: _____

Approved by: _____

The following items **must** be submitted or completed and returned.

1. _____ Request for Taxpayer Identification and Certification and Copy of Non-Profit Letter supported by 501 (C) (3)
2. _____ W-9 Form
3. _____ Duns Number
4. _____ Letter Request to Participate in the National School Lunch Program.
5. _____ Application/Agreement Confirmation (sign in blue ink)
6. _____ Amendment: CNP Permanent Application/Agreement 1999-2000 (sign in blue ink)
7. _____ Policy Statement for Free and Reduced-Price Meals (sign in blue ink)
8. _____ Information Needed For New NSLP Participants
9. _____ Child Nutrition Programs Add/Remove Form (Attachment F)
10. _____ School or Unit Information Sheet: Attachment C (complete one per operating site)
11. _____ After School Snack Program (Attachment E-1) (sign in blue ink)
12. _____ Collection Procedures
13. _____ Child Nutrition Program Audit Certification
14. _____ Certification Regarding Debarment, Suspension (sign in blue ink)
15. _____ Statement of Authority and Signature Authorization
16. _____ Certification Regarding Drug-Free Workplace Requirements (sign in blue ink)
17. _____ Attestation of Compliance with Alabama Implementation of USDA Smart Snacks
18. _____ Statewide Procurement/Participation Site Information Sheet (Form SWP-001)
19. _____ USDA Commodity Agreement (FDP Form 1)
20. _____ Civil Rights Pre-Award Compliance Checklist
21. _____ STAARS Vendor Self-Service (Substitute Form & Business Page Summary)
22. _____ Private School must register with State Department of Education

Free & Reduced Price School Meals Application Information:

23. _____ Household Application for Free and Reduced Price School Meals
24. _____ Application Instructions- (How to apply for free and reduced price school meals)

- 25. _____ **Frequently Asked Questions About Free and Reduced Price School Meals**
- 26. _____ **Notification Letter to Parents: (1) Notice of Direct Certification, (2) Notice of Households of Approval/Denial of Benefits
Optional: (1) Sharing Information with Medicaid/CHIP, (2) Sharing Information with Other Programs**
- 27. _____ **Verification Letters: (1) We Must Check Your Application, (2) We Have Checked Your Application**
- 28. _____ **Public Release**

Civil Rights Compliance Review:

- A. _____ **Copies of Free & Reduced price policy statements, letters to parents, public releases, and other materials used to publicize the availability of the program and nondiscrimination requirements.**
- B. _____ **Estimated data on the racial or ethnic makeup of the applicant organization’s program service area and enrollment.**
- C. _____ **Description of membership requirements as a prerequisite for admission to the applicant’s institution, if applicable.**
- D. _____ **Names of other Federal agencies providing assistance to the applicant organization and whether the applicant has ever been found to be in noncompliance by those Federal agencies.**

New Sponsor Information Received:

- 1. _____ **Instructions for completing Form CNP 1 (Application/Agreement)**
- 2. _____ **Application/Agreement 2016-2017 District & School Data Update Information**
- 3. _____ **Reconciliation Methods**
- 4. _____ **After School Snack Program Guidelines**
- 5. _____ **Income Eligibility Guidelines**
- 6. _____ **Meal Planning Pattern Guidance**
- 7. _____ **Instructions for Certification: Regarding Debarment, Suspension & Other Responsibility Matters (Form AD-1047)**
- 8. _____ **Food Distribution Contacts**

USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.