

New Sponsor Training Workshop

PRESENTED BY:

JULIE AUTREY, MS

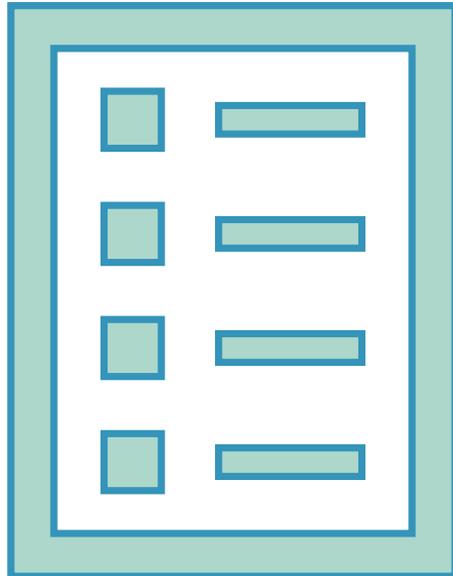
ALSDE CNP EDUCATION SPECIALIST

APRIL 1, 2021



Click on the link below to access the recorded training:

<https://alsde.webex.com/alsde/lsr.php?RCID=07bc9b888b904a958d07ebee9e2937bf>



AGENDA

Free and Reduced-Price Meal Application

1. Eligibility Manual for School Meals
2. Income Eligibility Guidelines
3. Public Release

Verification

1. Verification Summary Report
2. Recordkeeping

USDA Provisions

1. Community Eligibility Provision
2. Provision 1, 2 & 3

Wellness Policy

Eligibility Manual for School Meals Determining and Verifying Eligibility



USDA USDA Food and Nutrition Services
Child Nutrition Programs

July 18, 2017

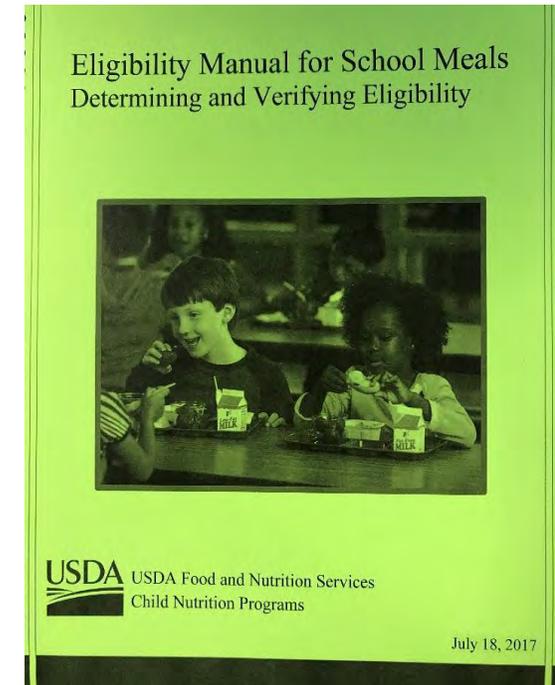
Reference

(SY 20-21 will continue to use this version).

Reference

Eligibility Manual for School Meals Determining and Verifying Eligibility School Year 2017-2018

(SY 20-21 will continue to use this version).



Eligibility Manual

Determine Eligibility

- Direct Certification:
 - Private Schools will need to submit DC students and enrollment as of April 1 to ALSDE on or before April 15.

Protect Student Privacy

Ensure accuracy through the verification process

Policy Statement



Free & Reduced-Price School Meals Application Prototype Email

USDA Free and Reduced Price School Meals Application and additional resources for School Year (SY) 2021.

2020-2021 Prototype Household Application for Free and Reduced Price School Meals

Apply online: [INSERT URL HERE](#)

STEP 1 List ALL Household Members who are infants, children, and students up to and including grade 12 (if more spaces are required for additional names, attach another sheet of paper)

<p>Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related."</p> <p>Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply for Free and Reduced Price School Meals for more information.</p>	Child's First Name	MI	Child's Last Name	Grade	Student? Yes No	Foster Care	Homeless, Migrant, Runaway
					<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Check all that apply

STEP 2 Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDIPIR?

If NO > Go to STEP 3. If YES > Write a case number [here](#) then go to STEP 4 (Do not complete STEP 3)

Case Number:

Write only one case number in this space.

STEP 3 Report Income for ALL Household Members (Skip this step if you answered "Yes" to STEP 2)

Are you unsure what income to include here?

Flip the page and review the charts titled "Sources of Income" for more information.

The "Sources of Income for Children" chart will help you with the Child Income section.

The "Sources of Income for Adults" chart will help you with the All Adult Household Members section.

A. Child Income
Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

Child Income: \$

How often? None 1-2 times 3-4 times 5-6 times 7-10 times More than 10 times

B. All Adult Household Members (including yourself)
List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work	Public Assistance/Child Support/Alimony	Pensions/Retirement/All Other Income	How often?					
				None	1-2 times	3-4 times	5-6 times	7-10 times	More than 10 times
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>					
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>					
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>					
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>					
	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>					

Total Household Members (Children and Adults)

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member:

Check if no SSN

STEP 4 Contact information and adult signature. **Mail Completed Form To: INSERT YOUR SCHOOL/DISTRICT MAILING ADDRESS HERE**

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Street Address (if available) Apt # City State Zip Daytime Phone and Email (optional)

Printed name of adult signing the form: Signature of adult: Today's date:

HOUSEHOLD SIZE	FEDERAL POVERTY GUIDELINES	REDUCED PRICE MEALS - 185 %					FREE MEALS - 130 %				
	ANNUAL	ANNUAL	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY	ANNUAL	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY
48 CONTIGUOUS STATES, DISTRICT OF COLUMBIA, GUAM, AND TERRITORIES											
1	12,880	23,828	1,986	993	917	459	16,744	1,396	698	644	322
2	17,420	32,227	2,686	1,343	1,240	620	22,646	1,888	944	871	436
3	21,960	40,626	3,386	1,693	1,563	782	28,548	2,379	1,190	1,098	549
4	26,500	49,025	4,086	2,043	1,886	943	34,450	2,871	1,436	1,325	663
5	31,040	57,424	4,786	2,393	2,209	1,105	40,352	3,363	1,682	1,552	776
6	35,580	65,823	5,486	2,743	2,532	1,266	46,254	3,855	1,928	1,779	890
7	40,120	74,222	6,186	3,093	2,855	1,428	52,156	4,347	2,174	2,006	1,003
8	44,660	82,621	6,886	3,443	3,178	1,589	58,058	4,839	2,420	2,233	1,117
For each add'l family member, add	4,540	8,399	700	350	324	162	5,902	492	246	227	114
ALASKA											
1	16,090	29,767	2,481	1,241	1,145	573	20,917	1,744	872	805	403
2	21,770	40,275	3,357	1,679	1,550	775	28,301	2,359	1,180	1,089	545
3	27,450	50,783	4,232	2,116	1,954	977	35,685	2,974	1,487	1,373	687
4	33,130	61,291	5,108	2,554	2,358	1,179	43,069	3,590	1,795	1,657	829
5	38,810	71,799	5,984	2,992	2,762	1,361	50,453	4,205	2,103	1,941	971
6	44,490	82,307	6,859	3,430	3,166	1,583	57,837	4,820	2,410	2,225	1,113
7	50,170	92,815	7,735	3,868	3,570	1,785	65,221	5,436	2,718	2,509	1,255
8	55,850	103,323	8,611	4,306	3,974	1,987	72,605	6,051	3,026	2,793	1,397
For each add'l family member, add	5,680	10,508	878	438	405	203	7,384	616	308	284	142
HAWAII											
1	14,820	27,417	2,285	1,143	1,055	528	19,266	1,606	803	741	371
2	20,040	37,074	3,090	1,545	1,426	713	26,052	2,171	1,086	1,002	501
3	25,260	46,731	3,895	1,948	1,798	899	32,838	2,737	1,369	1,263	632
4	30,480	56,388	4,699	2,350	2,169	1,085	39,624	3,302	1,651	1,524	762
5	35,700	66,045	5,504	2,752	2,541	1,271	46,410	3,868	1,934	1,785	893
6	40,920	75,702	6,309	3,155	2,912	1,456	53,196	4,433	2,217	2,046	1,023
7	46,140	85,359	7,114	3,557	3,284	1,642	59,982	4,999	2,500	2,307	1,154
8	51,360	95,016	7,918	3,959	3,655	1,828	66,768	5,564	2,782	2,568	1,284

Income Eligibility Guidelines

FEDERAL REGISTER : CHILD NUTRITION PROGRAMS: INCOME ELIGIBILITY GUIDELINES

USDA Prototype Application

1. Prototype letter to households
 - *Frequently Asked Questions About Free and Reduced Price School Meals*
2. Prototype application instructions
 - *How to Apply for Free and Reduced Price School Meals*

3. Prototype information sharing authorizations
(To ensure compliance use the letter posted on the ALSDE website.)
 - Sharing Information with Medicaid/SCHIP
 - Sharing Information with Other Programs
4. Prototype household benefit issuance notifications:
 - Notice to Direct Certification
 - *Notice to Households of Approval/Denial of Benefits*
5. SY21-22 Income Eligibility Chart
6. SY21-22 Public Release
7. Prototype verification materials:
 - We Must Check Your Application
 - We Have Checked Your Application

NOTE: The USDA Non-Discrimination is not required on FAQ if you send out all information in a packet. If you send documents out separately, the USDA Non-Discrimination Statement must be included on the Frequently Asked Questions for F/R Meal Applications and the How to Apply for Free and Reduced Price School Meals.

Title	Description
School Nutrition Programs Forms	Listing of current forms used by programs operating NSLP, SBP, CEP, SSO, Smart Snacks Standards.

Title	Description
School Meals - Translated Applications	School Meals - Translated Applications
Siblings Extension of Categorically Eligibility Documentation	Siblings Extension of Categorically Eligibility Documentation
State Memo - USDA Free and Reduced Price School Meals Application and Verification Forms for School Year 20-21	State Memo - USDA Free and Reduced Price School Meals Application and Verification Forms for School Year 20-21
2020-21 Customized F-R Application Checklist	2020-21 Customized F-R Application Checklist
2020-21 Free and Reduced Price Meals Application	2020-21 Free and Reduced Price Meals Application
2020-21 Frequently Asked Questions About Free and Reduced Price School Meals	2020-21 Frequently Asked Questions About Free and Reduced Price School Meals
2020-21 How to Apply for Free and Reduced Price Meal Application	2020-21 How to Apply for Free and Reduced Price Meal Application
2020-21 Income Eligibility Guidelines July 2020 - June 2021	2020-21 Income Eligibility Guidelines July 2020 - June 2021
2020-21 Public Release	2020-21 Public Release
2020-21 USDA Prototype Application for Free and Reduced Price School Meals Accompanied Documents	2020-21 USDA Prototype Application for Free and Reduced Price School Meals Accompanied Documents
UPDATED 2017 Eligibility Manual for School Meals - JULY 18 2017	UPDATED 2017 Eligibility Manual for School Meals - JULY 18 2017

Prototype Application

The *USDA Free and Reduced Price Meals Prototype Application* for SY 21 is posted on the Alabama State Department of Education website.

Click on [Forms and Resources](#) - [School Nutrition Programs](#)

[School Nutrition Programs](#) -

[SY 20-21 Free/Reduced Application resources.](#)

State Approval

CUSTOMIZED APPLICATION FOR FREE & REDUCED-PRICE SCHOOL MEALS

Family Friendly Application Translations

Translated applications are available in 34 languages and intended to be used directly by families. The application package has been limited to include only the initial information that families need under the “Resources for Households” heading. The additional prototype household letters are found under the “Resources for State and Local Agencies”. All items are located within the link below.

<http://www.fns.usda.gov/school-meals/applying-free-and-reduced-price-school-meals>

Application Distribution

- ✓ The Prototype Application for Free and Reduced Price School Meals,
- ✓ Frequently Asked Questions About Free and Reduced Price School Meals, and
- ✓ How to Apply for Free and Reduced Price School Meals must be provided to parents/guardians together.
 - ✓ If separated, the USDA Non-Discrimination Statement must be added to the Frequently Asked Questions About Free and Reduced Price School Meals and the How to Apply for Free and Reduced Price School Meals.
- ✓ LEAs cannot require a household to complete an application for benefits.
- ✓ Public Release must be published before the applications are sent out notifying the public of the F/R applications are being distributed to all families that are not directly certified.

Notification of Eligibility through Direct Certification

Must notify of eligibility determination in writing.

- The notification must explain that the child is eligible for free benefits without further application.
- The notification must clarify eligibility that free meal benefits extend to all school-aged children in the household
- Must inform households of how to notify the LEA of any additional school-aged children in the household not listed on the notification and to all school-aged children in the household
- Must explain how the household can notify the LEA if the household does not wish to receive free benefits for directly certified children
- ALSDE distributes the DC list to LEAs nightly and it is the responsibility of the district to upload the list to your POS and back of house software.

PUBLIC RELEASE

This is the public release which will be sent to the agencies listed below:

SENT TO: News Media: _____ Date: _____
 Unemployment Office: _____ Date: _____
 Labor Employer: _____ Date: _____

Public Release

Name of School/School District today announced its policy for free and reduced-price meals for children served in schools under the National School Lunch Program and/or School Breakfast Program. Local school officials have adopted the following household size and income criteria for determining eligibility:

Children need healthy meals to learn. Name of School/School District offers healthy meals every school day. Breakfast costs **[\$]**, lunch costs **[\$]**. **Your children may qualify for free meals or for reduced price meals. Reduced price is [\$] for breakfast and [\$] for lunch.** Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from **[State SNAP], (the Food Distribution Program on Indian Reservations (FDPIR)) or [State TANF]**, are eligible for free meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children who are directly certified are eligible to receive free meals.
- When known to **[Name of School/School District]**, households will be notified of their children's eligibility for free meals based on their participation (or a household member's participation) in the Supplemental Nutrition Assistance Program (SNAP), Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance for Needy Families (TANF). If the State program meets Federal standards.
- When known to **[Name of School/School District]**, households will be notified of any child's eligibility for free meals based on the individual child's designation as Other Source Categorically Eligible, as defined by law. Children are determined Other Source Categorically Eligible if they are:
 Homeless,
 Migrant,
 Runaway,
 A foster child, or
 Enrolled in Head Start or an eligible pre-kindergarten program (See: SP 10-015: D&As Regarding the Participation of Head Start Programs in Child Nutrition Programs. <https://www.fns.usda.gov/ncps/edp/edp-participating-state-children-programs-child-nutrition-program-01>)

**Income Eligibility Guidelines
 Effective Date: July 1, 2020 – June 30, 2021.**

Household Size	Federal Poverty Guidelines (Annual)	Free Meals					Reduced Meals				
		Annual	Monthly	Two per Month	Every Two Weeks	Weekly	Annual	Monthly	Two per Month	Every Two Weeks	Weekly
1	\$12,060	1,005	83.75	167.50	39.38	31.50	13,460	1,121.67	224.33	56.08	44.87
2	17,040	1,417	1,180.83	236.17	59.04	47.23	15,480	1,290.00	258.00	64.50	51.60
3	21,760	1,816	1,513.33	303.33	75.83	61.50	17,500	1,458.33	291.67	72.92	58.33
4	26,320	2,200	1,833.33	458.33	114.58	91.67	19,520	1,626.67	326.67	81.67	65.33
5	30,740	2,564	2,136.67	534.17	133.54	106.67	21,540	1,795.00	358.75	90.19	72.15
6	35,000	2,908	2,423.33	605.83	151.46	121.33	23,560	1,963.33	390.83	97.71	78.17
7	39,160	3,236	2,696.67	674.17	168.54	135.83	25,580	2,131.67	422.92	105.73	84.19
8	43,220	3,548	2,956.67	739.17	184.79	148.33	27,600	2,300.00	450.00	112.50	90.00
9 or more	47,180	3,844	3,203.33	800.83	200.21	161.67	29,620	2,468.33	482.08	120.52	96.00

- HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY?** Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and you have been told your children will get free meals, please call or e-mail **[school, homeless liaison or migrant coordinator]**.
- DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. Use one Free and Reduced Price School Meals Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: **[name, address, phone number]**.
- SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact **[name, address, phone number, e-mail]** immediately. No further application is required for free meal benefits. If the household was notified by the LEA that all children in the household were directly certified.

5. CAN I APPLY ONLINE?

Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit www.usda.gov to begin or to learn more about the online application process. Contact **[name, address, phone number, e-mail]** if you have any questions about the online application.

No, an online application is not available at www.usda.gov.

- MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE?** Yes. Your child's application is only good for that school year and for the first few days of this school year, through **[state]**. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
- I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
- WILL THE INFORMATION I GIVE BE CHECKED?** Yes. In accordance with program regulations school officials will be verifying the income of some households at some time during the school year. Selected households will be requested to provide income documentation <https://www.usda.gov> continue receiving free and reduced-price meals.
- IF I DON'T QUALIFY NOW, MAY I APPLY LATER?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.

WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: **[name, address, phone number, e-mail]**.

MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.

WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you usually receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$500, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.

WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will not be counted as zeros. Please be careful when leaving income fields blank, as we will assume you want to do so.

DO I HAVE TO PROVIDE MY SOCIAL SECURITY NUMBER? Only the last 4 digits of the social security number of the household's primary wage earner or another adult household member (or an indication of "none") is required.

MAY I DECLINE BENEFITS? Yes. Households notified of their children's eligibility must contact **[Name of School/School District]** or school if they choose to decline the free meal benefits.

WHAT IF ALL CHILDREN ELIGIBLE FOR BENEFITS ARE NOT ON THE NOTICE OF ELIGIBILITY LETTER? If children or households receive benefits under Assistance Programs or Other Source Categorically Eligible Programs and are not listed on the notice of eligibility and are not notified by the school of their free meal benefits, the parent or guardian should contact the school or should submit an income application.

- WE ARE IN THE MILITARY. DID WE REPORT OUR INCOME DIFFERENTLY?** Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
- WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY?** List any additional household members on a separate piece of paper and attach it to your application. Contact **[name, address, phone number, e-mail]** to receive a second application.
- MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for **[State SNAP]** or other assistance benefits, contact your local assistance office or call **[State hotline number]**.

If you have other questions or need help, call **[phone number]**.

Sincerely,

[District Representative Signature]

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, audiotope, 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](https://www.usda.gov), (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:

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

This institution is an equal opportunity provider.

Public Release

Duration of Eligibility



A child's eligibility is in effect from the date of eligibility for the current school year until a new application is approved or denied or children are directly certified, up to 30 operating days into the subsequent school year.



If no new application is submitted or children are not directly certified in the subsequent school year, children must continue to receive the previous year's level of benefits for up to 30 operating days.



If no new application is submitted and eligibility is not established through direct certification by the end of the 30-day carryover period, a child's eligibility for free or reduced price meals expires, and the **LEA must discontinue benefits.**

It is recommended that applications be filed in the district central office.



Applications must be readily retrievable



Six categories of applications:

Free

Reduced

Denied

Withdrawn

Temporary

Verification



Document changes on applications

Filing/Maintaining Applications

Training

CNP Directors are responsible for training all staff members who process Free and Reduce Price Meal Applications and/or assist with verification process.

Remember when training your staff this year, to encourage school secretaries and principals to update student addresses on a regular basis. We discovered through the Pandemic EBT process that many families did not have accurate contact information which delayed receipt of their PEBT cards.



Verification Guidance

Eligibility Manual for School Meals

Determining and Verifying Eligibility

July 18, 2017

Section 6, Pages 96-117

Eligibility Manual for School Meals Determining and Verifying Eligibility



USDA USDA Food and Nutrition Services
Child Nutrition Programs

July 18, 2017

What is Verification?



Confirmation of eligibility for free and reduced price school meals based on applications.



Only required when eligibility is determined through an application.



Is not required for eligibility through direct certification or if a district is CEP



Required annually by the USDA Reauthorization Act of 2004

Verification Summary Report

OCTOBER 1

Compete Sections 4 and 5

- Enter number of applications for each category in Section 4 Column A
- Enter zeroes for Section 4 Column B
- In Section 5-3 enter the Type of Verification process used. (This information is found in the verification email.)
- Section 5-5 will automatically generate and the number of applications to verify will appear.

OCTOBER 31 (or last operating day of October)

Complete Section

- Remove zeroes and enter actual numbers.



Category	Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J
...



NSLP

Forms

- Policy Checklist
- Schedule A
- SFA Officials
- CEP Form
- Collection Procedures
- SSO
- Site Data
- Direct Cert
- Verification Summary**

5-5: Number of applications selected for verification sample:	<input type="text"/>
Calculation of number of applications to be verified is pending.	

Post-Selection Procedures

Family Income for Children		Sources of Income for Children	
	Example(s)	Earnings from Work	Public Assistance / Alimony / Child Support
	- A child has a regular full or part-time job where they earn a salary or wages	- Salary, wages, cash bonuses	- Unemployment benefit
	- A child is blind or disabled and receives Social Security benefits	- Net income from self-employment (farm or business)	- Worker's compensa-
	- A Parent is disabled, retired, or deceased, and their child receives Social Security benefits	If you are in the U.S. Military:	- Supplemental Security Income (SSI)
Child	- A friend or extended family member regularly gives a child spending money	- Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances)	- Cash assistance from State or local government
	- A child receives regular income from a private pension fund, annuity, or trust	- Allowances for off-base housing, food and clothing	- Alimony payments
			- Child support payments
			- Veteran's benefits
			- Strike benefits

Ethnic Identities

Provide information about your children's race and ethnicity. This information is important and helps to make sure we are fair and does not affect your children's eligibility for free or reduced price meals.

Latino Not Hispanic or Latino
 American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander

The USDA requires the information on this application. You do not need to provide a social security number of the adult household member who is applying for benefits. Individuals who are deaf, hard of hearing, or have a hearing aid should call the Federal Relay Service at (800) 877-8339. Add available in languages other than English.

To file a program complaint or discrimination, complete the USDA Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_form, or write a letter addressed to USDA and provide in the letter the name of the program, institution, and enforcement of the law. To request a copy of the complaint form, call (866) 632-6932.

U.S. Department of Agriculture
 Office of the Assistant Secretary for Civil Rights
 1400 Independence Avenue, SW
 Washington, D.C. 20250-0410
 fax: (202) 690-7442; or
 email: program.intake@usda.gov
 This institution is an equal opportunity provider.

52. Every 2 Weeks x 26, Twice a Month x 24 Monthly x 12
 How often?

Weekly Bi-Weekly 2x Month Monthly

Household Size:

Categorical Eligibility

Eligibility: Free Reduced Denied

Date: Confirming Official's Signature: Date: Verifying Official's Signature:

Confirmation Reviews

Prior to any other verification activity, a determining official must review each approved application selected for verification to ensure the initial determination was accurate. Sign and include your title to the back of application under Confirming Official

Any LEA that conducts a confirmation review of all applications at the time of certification is not required to conduct confirmation reviews prior to verification.

The confirmation review must be done by an individual other than the individual who made the initial eligibility determination

Replacing Applications

After completing the confirmation reviews, the LEA may, on a case-by-case basis, replace up to five percent of applications selected.

- Applications may be replaced when the LEA believes the household would be unable to satisfactorily respond to the verification request.

Verification “For Cause” Applications

The LEA has an obligation to verify all questionable applications as “For Cause.”



Any verification that is conducted “For Cause” is in addition to the sample size required.



“For cause” applications are not included in Section 5-5 of Verification Summary Report.

Household Notification Letter



Any communications with households concerning verification must be in an understandable and uniform format and, to the maximum extent attainable, in a language that parents and guardians can understand.

State agencies and LEAs are expected to have a system in place to provide written verification notices in the parent or guardian's primary language, and to provide oral assistance if the parent or guardian has difficulty understanding the written request.

Verification Follow-Up

If, after at least one follow-up attempt, the household responds and provides all needed evidence, verification is considered complete for the household. As appropriate, the LEA would complete verification by:

Informing the household there is no change in benefits;

Notifying the household its benefits will be increased; or

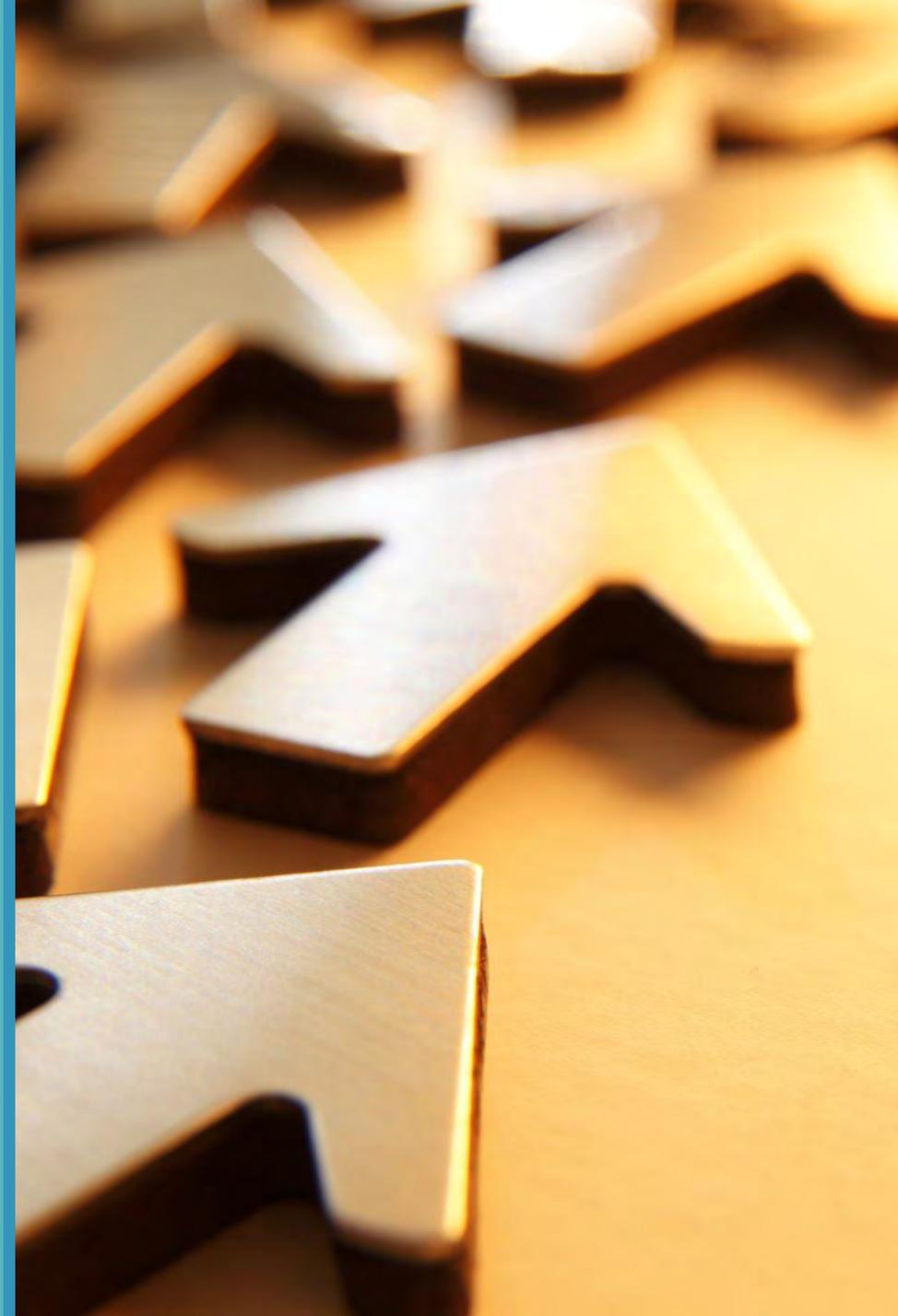
Sending notice of adverse action.



LEAs are encouraged but not required to conduct additional follow-up if a household fails to provide adequate documentation after the first required follow-up. 0

Documenting Changes

- Initial with title
- Date
- Include any important information
 - Who
 - What
 - When
 - Where
 - Why



When Verification is Considered Complete



The household submits either adequate written evidence or collateral contact corroboration of income or categorical eligibility.



The household submits either adequate written evidence or collateral contact corroboration of income indicating that the children should receive either a greater or lesser level of benefits.

Verification is considered complete for this household when the household is notified that its benefits will be increased or decreased. If benefits are decreased, a notice of adverse action must be sent before verification is considered complete.



The household indicates, verbally or in writing, that it no longer wishes to receive free or reduced price benefits.

Verification is considered complete when the notice of adverse action is sent.



The application provided case numbers. It is determined that no household member is receiving benefits from an Assistance Program.

Verification is considered complete when the notice of adverse action is sent.

Verification Process must be complete by November 15



All districts/facilities submit the Verification Summary report

- Charter Schools,
 - CEP districts,
 - RCCIs,
 - Public and
 - Private Schools.
-
- Verification Summary Report is normally due around January 22.



Recordkeeping

- Follow the most restrictive record retention policy between USDA, Alabama, and your local district
- Approved applications- date approved, level of benefits, signature or initials of reviewing official.
- Denied applications- reason for denial, date of denial, date notice sent, signature of reviewing official.
- Dates of transfers, withdrawals and changes in eligibility must be maintained.

USDA Provisions



Community Eligibility Provision



Provision 2

CEP

Community Eligibility Provision

The Community Eligibility Provision (CEP) is a meal service that allows participating schools or entire districts to serve breakfast and lunch at no cost to all enrolled students.

CEP is an option for local educational agencies (LEAs) and schools in high-poverty areas with an **identified student percentage (ISP) of 40% or higher**.

CEP is approved on Four-Year Cycles:

- LEAs can elect CEP in 4-year cycles. Schools can stop participating in CEP at any time or begin a new 4-year cycle early if the ISP increases.

Community Eligibility Provision (CEP)

ALSDE provides a direct certification list as of April 1 to public schools through an uninterrupted upload from DHR to PowerSchool Information System. This list goes out on April 15 each year.

Interested private schools must provide the State agency with identified student and enrollment data reflective of April 1 to participate in CEP.

Identified Students include:

Students directly certified through participation in:

1. Alabama SNAP – Supplemental Nutrition Assistance Program
2. TANF – Temporary Assistance for Needy Families
3. FDPIR – Food Distribution Program on Indian Reservations

Other Identified students also include:

- Homeless students
- Migrant Youth
- Runaways
- Students participating in Head Start or comparable State or Indian Tribal Organization funded pre-kindergarten program
- Non-applicants identified through means other than an application and approved by local officials

CEP Requirement	Annual Deadline	Waiver Deadline
Data Used to Calculate ISP	April 1	Anytime between July 1, 2020, and June 30, 2021
LEA Notification	April 15	June 30, 2021
State Agency Notification	April 15	June 30, 2021
State Agency Publication	May 1	June 30, 2021
Elect CEP for SY 2021-2022	June 30	September 30, 2021

BENEFITS of CEP

REDUCES THE ADMINISTRATIVE BURDEN:

- By eliminating the household application process and the process of verification of information on household applications
- Streamlines meal counting and claiming procedures at meal service.
- Eliminates school meal debt.

INCREASES STUDENT PARTICIPATION IN SCHOOL MEALS

- Creates more opportunities for students to receive nutrition necessary to optimize academic performance.
- Eliminates the stigma attached to free school meals

CEP Resource Center

The CEP Resource Center provides extensive resources for school officials at the local, State, and Federal level may use to better understand CEP and its positive benefits.

LEAs may use the CEP Estimator Tool to determine if CEP is a financially viable option, based on the LEA's expected monthly reimbursement rate

The Food Research and Action Center research and resources for CEP.
[Community Eligibility \(CEP\) Database - Food Research & Action Center \(frac.org\)](#)

USDA CEP Estimator Tool SY2021 [Community Eligibility Provision Resource Center | USDA-FNS](#)

Provisions 1, 2 & 3

1

Provision 1 reduces application burdens by allowing schools where at least 80 percent of the children enrolled are eligible for free or reduced price meals to certify children eligible for free meals for a 2-year period. Schools continue to take daily meal counts of the number of meals served to children by type as the basis for calculating reimbursement claims.

2

Provision 2 requires that the school serve meals to participating children at no charge but reduces application burdens to once every 4 years and simplifies meal counting and claiming procedures by allowing a school to receive meal reimbursement based on claiming percentages. Additional 4-year extensions to Provision 2 are possible when certain conditions are met.

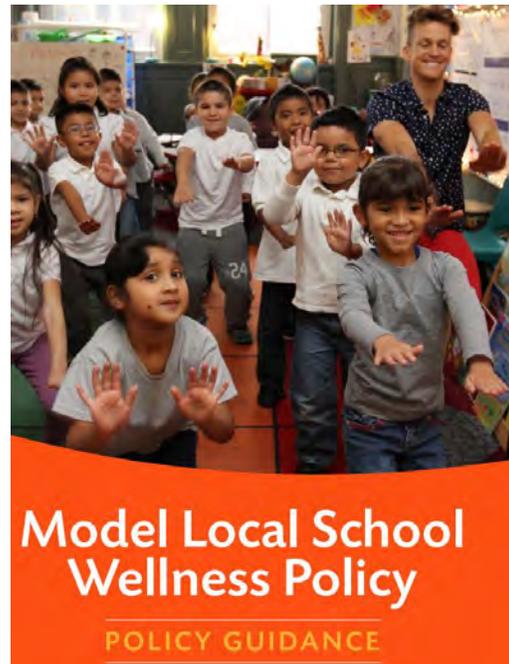
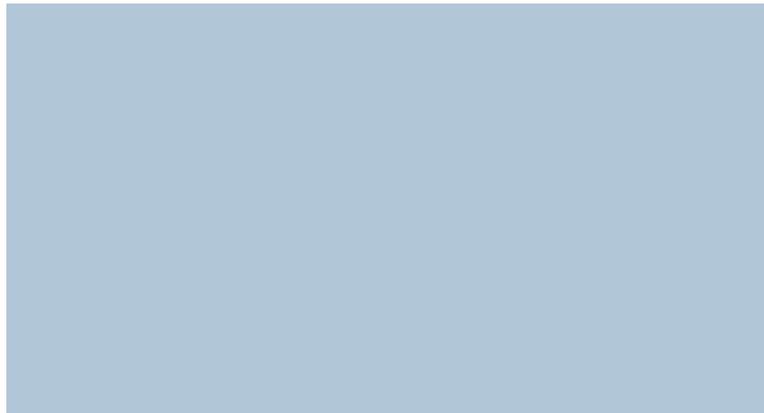
3

- Provision 3 requires that the school serve meals to participating children at no charge but reduces application burdens and meal counting and claiming procedures by allowing a school to receive a comparable level of Federal cash and commodity assistance as the school received in the last year in which free and reduced price eligibility determinations were made, adjusted for enrollment, inflation and operating days if applicable, for a period up to 4 years. Additional 4-year extensions to Provision 3 are possible when certain conditions are met.



Provision 2





Local Wellness Policy

- [2 \(healthiergeneration.org\)](https://healthiergeneration.org)
- [Local School Wellness Policy Outreach Toolkit | USDA-FNS](#)

LOCAL WELLNESS POLICY CHECKLIST

This checklist is intended to help schools meet the USDA regulations for the Local Wellness Policy.
(This checklist is not an assessment tool.)

- Nutrition Education** – Includes specific goals for nutrition education that were developed to enhance a child's understanding of healthy foods using evidence-based strategies.
- Nutrition Promotion** – Includes specific nutrition promotion that follows USDA regulations for school meals.
- Physical Activity** – Includes specific goals for physical activity that promote wellness using evidence-based strategies.
- Other School-Based Activities that Promote Student Wellness** – Includes other school-based activities that are designed to promote wellness in a manner that the Local Education Agency (LEA) determines is appropriate.
- Nutrition Guidelines:**
 - o Provides an assurance that guidelines for reimbursable school meals and a la carte foods shall not be less restrictive than regulations and guidance issued by USDA.
 - o Includes nutrition guidelines and standards for USDA/ALSDE Smart Snacks in School for all foods available on each school campus (including fundraisers) under the LEA during the school day with the objectives of promoting student health and reducing childhood obesity.
 - o Policies that allow marketing or advertising of only those foods/beverages that meet the USDA/ALSDE Smart Snacks in School nutrition standards.
- Wellness Committee:**
 - o Includes title of the LEA or school official(s) responsible for oversight of the Local Wellness Policy and efforts to involve parents, students, representatives of the Child Nutrition Program, the school board, school administrators, and the general public in the development of the Local Wellness Policy.
 - o Includes how potential stakeholders: parents, students, teachers, administrators, school health professionals, school board members, and the general public are made aware of their ability to participate in the development, review, update, and implementation of the Local Wellness Policy.
- Triennial Assessment:**
 - o Establishes a plan for measuring implementation of the Local Wellness Policy and completion of a triennial assessment at least once every three years.
 - o Includes designation of one or more persons within the LEA (or at each school) charged with operational responsibility for ensuring that the school follows the Local Wellness Policy.
 - o Includes when and how the review and update of the Local Wellness Policy occur.
- Public Notification:**
 - o Includes how the public and stakeholders are notified of the Local Wellness Policy, committee meetings, updates, activities, and assessments. (i.e., local newspaper, district website, school social media, etc.)
 - o Includes how the public can locate a copy of the Local Wellness Policy and Triennial Assessments.

Alabama State Department of Education, Child Nutrition School Programs

March 2021

LOCAL WELLNESS POLICY Requirements

1. Nutrition promotion and education
2. Physical activity
3. Other school-based activities that promote student wellness
4. Nutrition guidelines for all foods and beverages available or for sale on the school campus during the school day
5. Policies for other foods and beverages available on the school campus during the school day
6. Policies for food and beverage marketing that allow marketing and advertising of only those foods and beverages that meet the Smart Snacks in School nutrition standards.
7. Description of public involvement, public updates, policy leadership, and evaluation plan
8. Triennial Assessment of the Local Wellness Policy

Alabama State Department of Education
Child Nutrition Program

Local Wellness Policy: Triennial Assessment Report

This tool is intended to be a guide based on current regulations. It is the responsibility of the LEA to stay abreast of any updates and changes to the regulations and to implement any changes in local policies.

Background Information

To be compliant with the USDA final rule, at least once every three years, the district will assess the Local Wellness Policy. However, Local Education Agencies (LEAs) may assess their policy more frequently if they wish.

Purpose

The district should designate a representative to lead the wellness policy assessment. This representative must publicly invite members from the community, schools, and the district to participate. Members of the district wellness committee who are completing the assessment of the Local Wellness Policy may use this template. Section 3 of this template should be copied and completed for each school.

This template contains the three required components of the triennial assessment.

1. the extent to which the wellness policy compares to model wellness policies
2. progress made in attaining the goals of the wellness policy
3. the extent to which schools under the jurisdiction of the districts are complying with the district Wellness Policy.

Results

A copy of the assessment must be made available to the public. How the assessment is made available is the decision of the LEA. (i.e., district website, local newspaper, etc.) The triennial assessment summary and the assessment details (e.g., WellSAT 3.0 report) must be shared.

Recordkeeping for the Child Nutrition Program Administrative Review:

- a copy of the most recent triennial assessment, along with supporting documentation
- a copy of the current and previous board approval of the policy
- documentation demonstrating the policy has been made available to the public
- documentation of efforts to review and update the policy, including who was involved and how the district made stakeholders aware of their ability to participate (i.e., meeting agendas and sign-in sheets)

Page 1



Questions?

Non-Discrimination 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: [How to File a Complaint](#), 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.