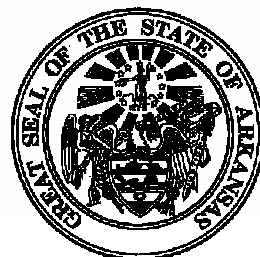# SNP On-Line Application

Business User Manual

Special Nutrition Program

August 14, 2007

Table of Contents

1 Summary

The Special Nutrition Program manual is a tool for businesses associated with the Special Nutrition Program to use in conjunction with the SNP Web online software application. This manual is a reference guide for users that will assist in navigating the web application as they complete their day-to-day tasks.

The SNP Online Application has been developed in ASP.Net using a SQL database. The Minimum System Requirements for the SNP Web Application are:

- Windows 98
- Internet Explorer 6
- 128-bit encryption enabled

Session Cookies will be used to run the program; if Cookies are disabled, the user will be notified that cookies are required to utilize the program.

2 Accessing the Arkansas Special Nutrition Program System

2.1 Welcome to the Arkansas Special Nutrition Program Home Page

The Arkansas Special Nutrition Program Home Page contains general information about the Special Nutrition Program. Providers can review this page to determine who may be eligible to participate in the SNP program and find the answers to Frequently Asked Questions. Providers can also select the **Apply to Participate in the Special Nutrition Program On-line** button to initiate a request for a user name and password or select the **Print Blank Application Forms** button to access the print forms directory from this page. (see *Figure 2.1-1*)
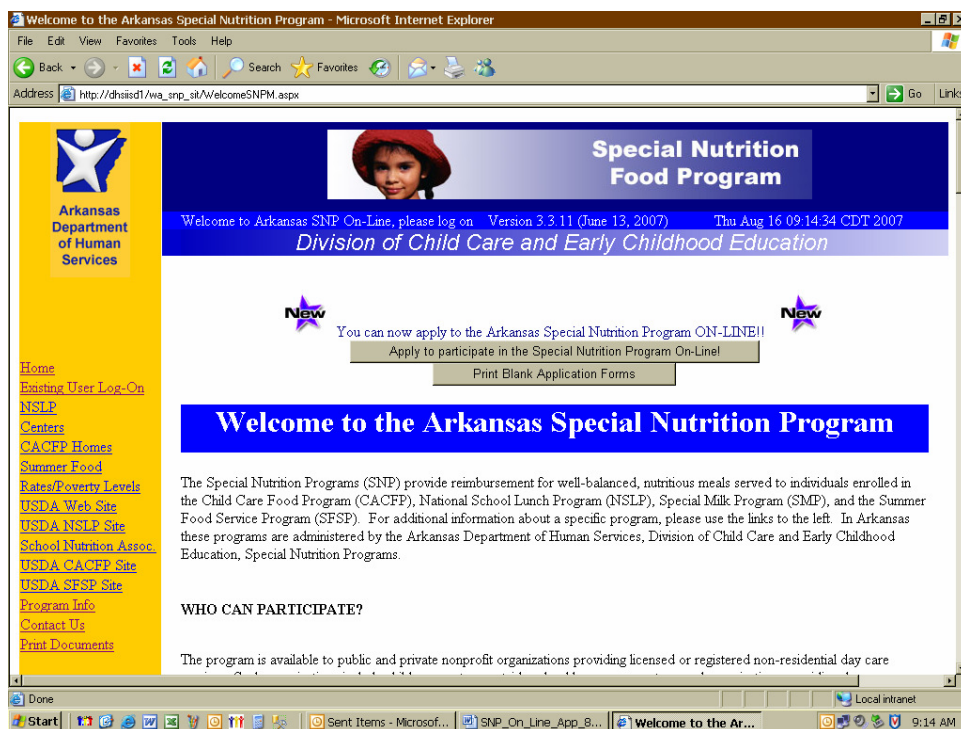
Figure 2.1-1 Welcome to Arkansas Special Nutrition Program Main Page

2.1.1 Print Blank Application Forms

1. Although it is recommended that providers submit their paperwork online, some users prefer to submit the hard copy form to their coordinator. To print blank application forms and submit a hard copy of their information to the SNP office, select the **Print Blank Application Forms** button. The user will be directed to the Print Documents form.

   a. A directory of all programs' paper applications and forms will be found in this section. (see *Figure 2.1-2*)
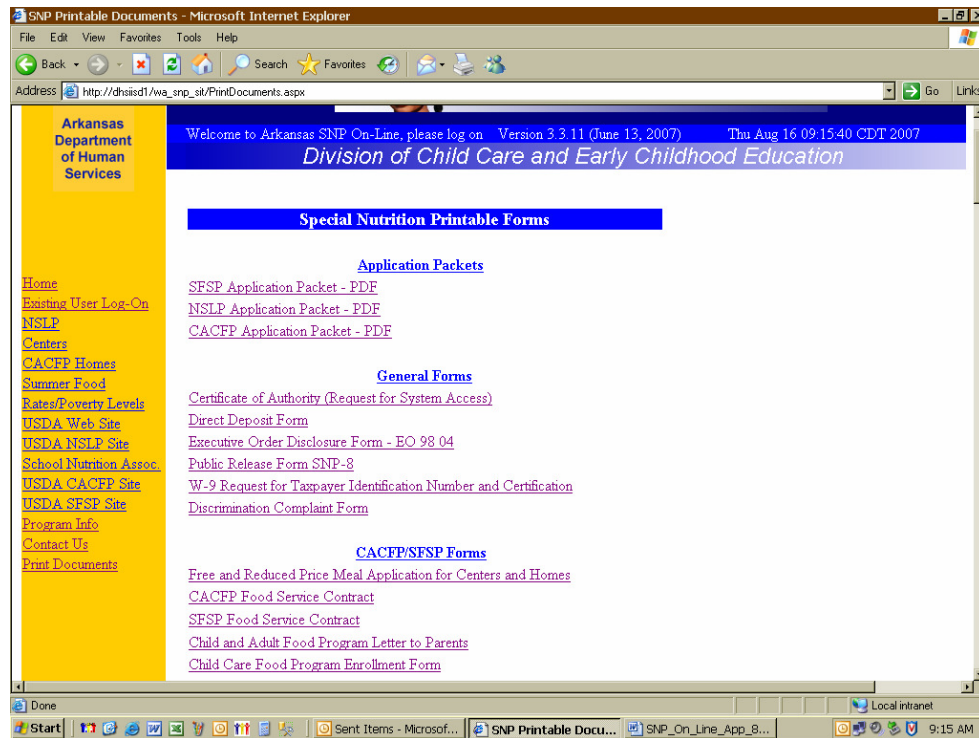
Figure 2.1-2 – Print Forms page

2. To access a specific form or application, select the form name. This will redirect the user to an Acrobat Reader PDF form to allow the user to print the form. (see *Figure 2.1-3*)
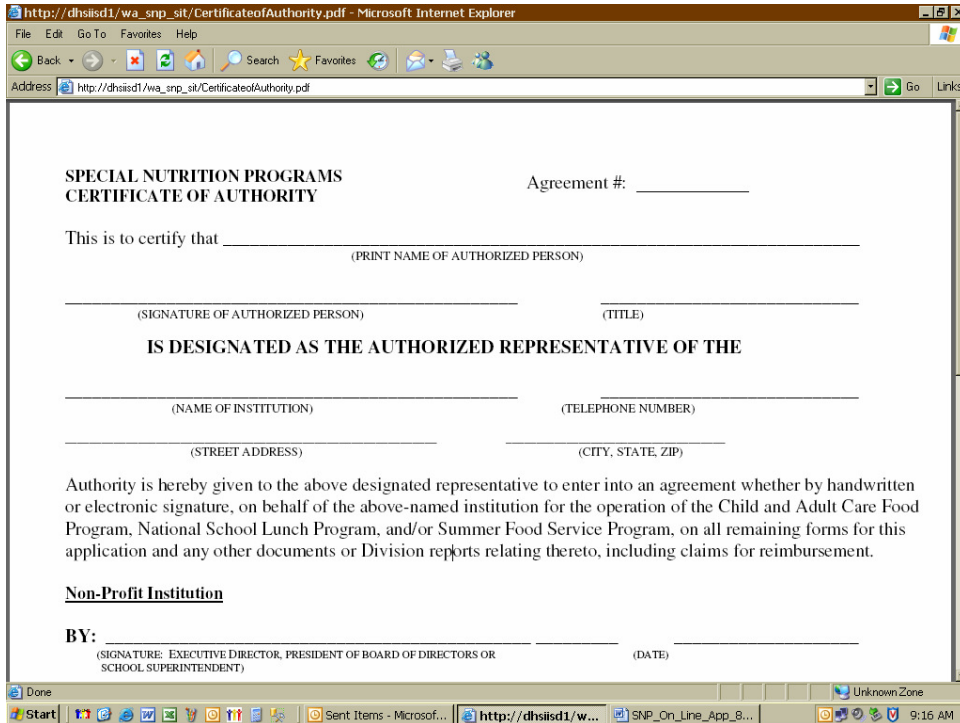
Figure 2.1-3 – Example of Certificate of Authority from Print Document directory

a. Select the **Print** button on the tool bar or by select *File* from the tool bar and then select *Print* in the drop down list to print a document.

b. Select the **Back** button on the tool bar to return to the directory or may close the browser.

2.1.2 Applying to the Special Nutrition Program On-Line

The **Apply to participate in the Special Nutrition Program On-Line** button can be selected to initiate a request for a user name and password for the Special Nutrition Program on-line application. After selecting this button, the user will be asked a series of questions to the appropriate program.

Follow these steps to navigate to the SNP Initial Screening Form:

1. Access the Special Nutrition Program Website by using the following URL:
   https://dhhs.arkansas.gov/wa_snp
   a. The Special Nutrition Program Home Page will appear.

2. Select the button labeled **Apply to Participate in the Special Nutrition Program On-Line**.
   a. Selecting this button will redirect the user to the SNP Initial Screening Form.

2.1.2.1 SNP Initial Screening Questionnaire

The SNP Initial Screening Questionnaire contains a series of questions to determine if a provider is eligible to apply.

Follow these steps to answer the questions on the SNP Initial Screening Questionnaire:

1. Select the radio button beside the answer that is the correct answer to the question being posed.
   a. When the radio button is selected a dot will appear in the provided space to indicate the answer that has been selected.

2. Select the **Next** button located at the end of the survey.
   a. If the user is determined eligible to apply for the Special Nutrition Program through the on-line application, the user will be directed to another set of questions that are specific to the program the user wishes to participate in.

   Note: More information about completing the application will be discussed in the specific SNP program sections of this manual.

   b. If the user is determined not eligible to apply for the Special Nutrition Program through the on-line application, the user will receive a pop-up message stating the following: "You need more information to proceed. Please contact SNP Central Office for information for the SNP Program. You may contact 1-800-482-5850 ext. 28699 or 682-8869 for assistance."

3. Additional questions will be posed to the user to evaluate the appropriate program.

   Note: Day Care Homes and Home Sponsors cannot apply for a user name online. All other programs can request a user name and password online, unless they are already an SNP recipient. If the user is already an SNP recipient, they shall contact SNP Central Office for assistance in obtaining their user name and password.

Follow these steps to answer the questions on the program's Initial Screening form:
1. Enter the requested information in the appropriately labeled field.

   Note: The **Same As** buttons located in the address portion of the form can be selected if the Mailing, Physical, and/or Record Keeping addresses are the same.

2. Select the radio button beside the answer that is the correct answer to the question being posed.
   a. When the radio button is selected a dot will appear in the provided space to indicate the answer that has been selected.

3. Once all requested information has been entered and all questions have been answered, select the **Submit Request for Access to the SNP System** button.

4. The user will be messaged as to if they do or do not meet the minimum requirements to request a user name and password.
    a. If the user entered data that meets the minimum requirements, the submitted request will be reviewed by the SNP staff and if approved, an e-mail with log-in instructions will be sent to the e-mail address provided when completing the Initial Screening form.

3   Existing User Log-on

Users that have access to the SNP On-line application will log in and complete their application to participate in the Special Nutrition Programs.

3.1 Entering User Name and Password

Once a user name and password have been assigned, the user can log in to complete the SNP On-line application by using the following steps:

1. Select the ***Existing User Log-on*** hyperlink from the main menu. (see *Figure 3.1-1*)

2. Select the User Name and Password fields and enter the correct user name and the assigned password for the facility attempting to log-in.

3. Once the information is entered select the **OK** button. To stop this action, select the **Cancel** button.

Figure 3.1-1 – User Log-On form

3.2 Changing Password

Users can change their password by using the following these steps:
1. Select the ***Existing User Log-on*** hyperlink from the Main Menu.

2. Select the **Change Password** button.

    a. When the **Change Password** button is selected, additional fields will display labeled New Password and Confirm New Password.

> **Note**: All passwords must contain both uppercase and lowercase alpha characters and at least one numeric character. The password must be at least 8 characters long, and cannot be one of the last 6 passwords used for the user account.

3. Enter the Username and current password in the corresponding fields.

4. Enter the desired password in the New Password field.

5. Re-enter the newly constructed password in the Confirm New Password field and select the **OK** button. To stop this action, select the **Cancel** button.

6. Once the password is updated, the user is required to sign in using the new password before they can access the online application system.

The newly entered password will be saved and can be used for future log-ins.

> **Note:** Passwords are required to be changed every 90 days. The user shall receive a message when attempting to access the program if the password is due to expire within 14 days or has expired since last log-in.

3.3 Lost Password

If a user forgets their current password that will allow them to access the SNP on-line application, the following steps can assist them in resetting their password:

1. Select the *Existing User Log-on* hyperlink from the Main Menu.

2. Enter the Username in the corresponding field.

3. Select the **Lost Password** button.
    a. A security question and answer field will appear below the **Lost Password** button.

4. Enter the correct Security Answer for the question listed and select the **Submit** button. To stop this action, select the **Cancel** button.

5. A message will display and an email will be sent to the user notifying them that the password has been reset to the last four digits of their Social Security Number.
    a. If the user cannot answer their Security Question, the user must contact SNP Central Office at 1-800-482-5850 ext. 28699 or 682-8869 for additional assistance.

4 Alerts

4.1 Accessing Alerts

1. Upon successful log-on to the system, the user is redirected to their home page. This page will display a welcome message, alerts data grid, and all businesses associated to the user.

   a. The alerts will default to the New and Open alerts. (see *Figure 4.1-1*)

Figure 4.1-1 – Alerts Data Grid on Business Home Page

2. To read an alert, the user shall select the alert from the data grid.

   a. The user is redirected to a Site Alert form which displays all data regarding the alert.

3. The Open Date and View Date auto-populates the date and time when the alert is accessed the first time. The Close Date auto-populates the date and time when the user changes the Status from "In Process" to "Closed".

   a. The status is automatically updated on "New" alerts to display as "In Process" once accessed and are then considered as Open.

   b. Once the alert is closed, the alert is removed from the home page alert data grid.

   c. Find closed alerts by selecting the **View Closed** button.

   d. The user can use the **View New/Open**, **View New**, and **View Closed** buttons to filter their alerts.

5 Business and Site Maintenance

5.1 Business Maintenance

From the user's home page, the user can select their business to access the Business Maintenance form.

Business Maintenance stores the contact information for a Business or Sponsor. The form displays the facility information such as addresses, contact information and allows the user access to applications and any sites associated to the business. (see *Figure 5.1-1*)

Figure 5.1-1 – Business Maintenance

1. The user can select the **Applications** button to access the Application Main form. The **Site Maintenance** button will redirect the user to the Site Maintenance form. Selecting the **View Screening** button will redirect the user to the View CACFP Screening questions.
   a. If the Business is NSLP or SFSP Entity Types, when the **View Screening** button is selected, the user will receive the message, "*This function is not available for SFSP or unassigned facilities.*"

2. The online application system is integrated with the Child Care Licensing (CLEAN) and DHS Exclusions systems.
   a. The facility status is validated and displayed from the Child Care Licensing system.
   b. The system displays any exclusions the facility has ever had. *Business Directors and Business Users will not be able to view exclusion data.*

5.2 Site Maintenance

1. When the user selects the **Site Maintenance** button in Business Maintenance, the user is redirected to the Site Listing page. This page displays all of the sites associated with the business. The user can select a site within the data grid or add sites. (see *Figure 5.2-1*)
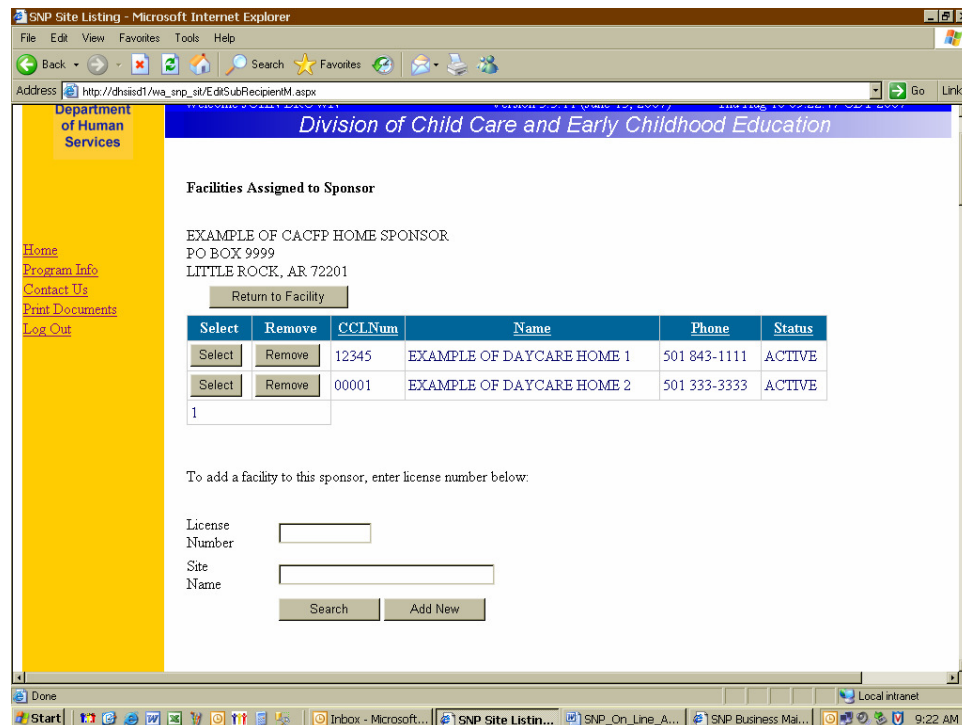
Figure 5.2-1 Site Listing

2. All Active and Inactive Sites will be displayed in the data grid. If a site has been closed by the Childcare Licensing Unit, the user shall contact their SNP Coordinator to change the status to Inactive.
    a. The user can remove Active or Inactive Sites at any time, but selecting the **Remove** button. The assigned SNP Coordinator will receive an alert when the user adds or removes sites they are associated with.

3. When the user selects a site or selects the **Add New** button, the user is redirected to the Site Maintenance form.

4. The online application system is integrated with the Child Care Licensing system (CLEAN) and DHS Exclusions.
    a. The facility status is validated and displayed from the Child Care Licensing system.
    b. The system displays any exclusions the facility has ever had. *Business Directors and Business Users will not be able to view exclusion data.*

6 New and Reapplication Processes

To initiate a new or reapplication, select the business from the home page to advance to the Business Maintenance form. On the Business Maintenance form, select the **Applications** button to advance to the Application Main form. (see *Figure 6.1-1*)

Figure 6.1-1 Application Main

1. For New or Reapplications, enter their contract year in the contract year field to initiate the process. When the user exits the field, the system will auto-populate the Contract Start and Contract End fields.

2. The user shall select the **Add New/Renewal Application** button to add the application to the application's data grid.

3. Select an application from the applications data grid to access the application checklist.

7 Completing On-Line Applications

7.1.1 Accessing the Online Application Checklist

1. Select an application in the application data grid on the Application Main form to access the application checklist.
   a. The type of Business determines the correct application checklist the user will use. (see *Figure 7.1-1*)
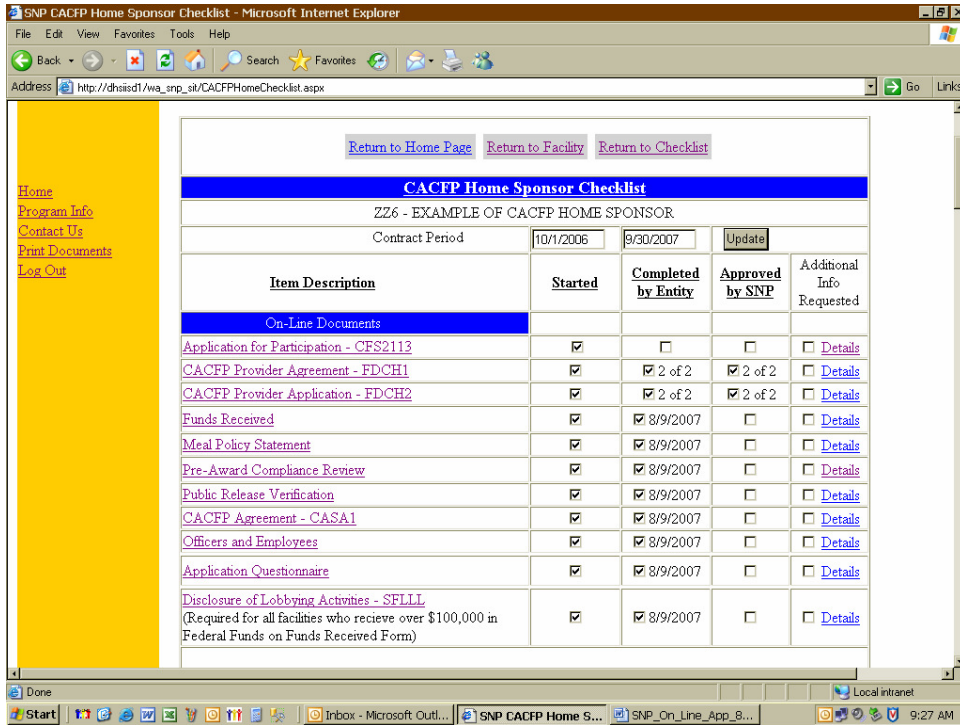
Figure 7.1-1 – Example of an incomplete Application Checklist

2. The application checklist is made up of hyperlinks, checkboxes and buttons.
   a. The hyperlinks found in the Item Description column redirect the user to the specific forms to be completed.
   b. The checkboxes in the Started, Completed by Entity, Approved by SNP, and Additional Info Requested columns informs the user of the status of each specific form.
   c. The *Details* hyperlink, listed at the end of each form's row, notifies the user of additional information needed for a specific form. The user will select the *Details* hyperlink to access more information regarding the missing information.
      i. SNP Staff can send an alert or an email to the business user to notify of additional information needed to process the form.

3. Three hyperlinks, *Return to Home Page, Return to Facility,* and *Return to Checklist*, are found on all online forms and checklists to offer the user short cuts for easier navigation throughout the system.

4. The system will display a date on the checklist to verify when the form was completed, approved or the date additional information was requested.
   a. By using the checkboxes and the dates, the user can monitor what has been processed on their application.

5. Once all mandatory forms have been completed, the user will submit the application. An alert is sent to the assigned coordinator to notify that the application is ready for processing.
   a. The system will display the date and time that the user submitted the form.

8 Children and Adult Care Food Program (CACFP)

Eligible public and private nonprofit child care centers, before and after school care centers, Head Start programs, and other institutions which are licensed to provide day care services may participate in CACFP. Depending upon the type of business, they will be categorized as independent or as sponsored organizations.

Each section will give a synopsis of the forms for each specific checklist. However, all of the forms will work the same. There are two types of forms: Online Documents and Paper Documents.

With the Online Documents, when the user starts a form, the system will automatically check the Started check box. When the form is submitted, the system will check the Completed by Entity checkbox. With the Paper Documents, the user will be required to manually select the Completed by Entity checkbox when they send in their paper documents to SNP Central Office.

The user shall complete the Online Documents and select the Submit button to electronically submit the form to the user's checklist. In some instances, the form may be information that must be read. The submit button for that form may read as "I Have Read and Understand This Form" or similar wording. Some forms may span additional pages, due to their length. Each form will give the user the opportunity to print the document for their records. Some forms will allow the user to copy data from one year to the next.

The Paper Documents section has links to allow the user to print PDF documents to be completed and returned to SNP Central Office. However, depending on the program, some information may not require a form.

8.1 For Profit Child Care Centers

8.1.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figure 8.1-1a-1b*)

Figure 8.1-1a – CACFP For-Profit Independent Checklist

Item Description	Started	Completed by Entity	Approved by SNP	Additional Info Requested
On-Line Documents				
Application for Participation - SNP5	☑	☑ 8/14/2007	☑ 8/14/2007	☑ 7/16/2007 Details
Funds Received - SNP4	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Meal Policy Statement - FRPS1	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Pre-Award Compliance Review - SNP6	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Public Release Verification - SNP7	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
CACFP Agreement - CASA1	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Officers and Employees - SNP3	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Adult Questionnaire (If Applicable) - APQ1	☐	☐	☐	☐ Details
Application Questionnaire - AQ1	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Administrative Budget - CAAB1	☑	☑ 7/16/2007	☑ 8/14/2007	☐ Details
Disclosure of Lobbying Activities - SFLLL (Required for all facilities who recieve over $100,000 in Federal Funds on Funds Received	☐	☐	☐	☐ Details

Figure 8.1-1a – CACFP For-Profit Independent Checklist

Paper Documents				
Certificate of Authority		☑ 7/16/2007	☑ 8/14/2007	☐ Details
Food Service Contract (If Applicable)		☐	☐	☐ Details
W-9 Taxpayer ID Certification		☑ 7/16/2007	☑ 8/14/2007	☐ Details
List of Enrolled Children Eligible for Free or Reduced Priced Meal Reimbursement (25% Required)		☑ 7/16/2007	☑ 8/14/2007	☐ Details
Direct Deposit Form (Optional)		☐	☐	☐ Details
Child or Adult Care Center License(s)		☑ 7/16/2007	☑ 8/14/2007	☐ Details
Most recent IRS Tax Form (first page and signature page sufficient) and documentation of last 2 quarters of payroll taxes paid		☑ 7/16/2007	☑ 8/14/2007	☐ Details
Executive Order Disclosure Form - EO9804		☑ 8/14/2007	☑ 8/14/2007	☐ Details
Training Status			☑ 8/14/2007	☐ Details

Training Date	Attended	Program	Class Name
07/15/2007	☑	All	SNP APPLICATION TRAINING

I certify to the best of my knowledge and belief that this application is true and correct in all aspects. I understand that this information is being given in connection with the receipt of Federal funds and the State Agency personnel may, for cause, verify information. I fully understand that deliberate misrepresentation may subject me and any principal or responsible persons of the institution submitting this application to prosecution under applicable Federal and/or State statutes.
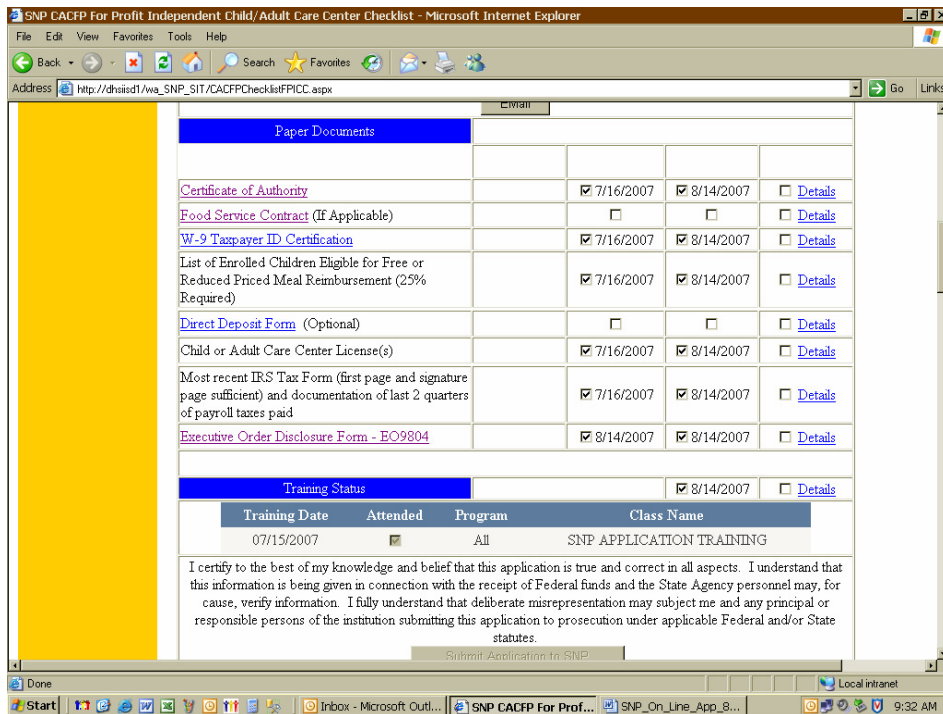
Figure 8.1-1b – CACFP For-Profit Independent Checklist

Below is a listing of each on-line document:

1. **Application for Participation – SNP 5**
   a. This form contains the general provider information, facility operating data, meal service data, facility directions, child and adult day care information, food service

patterns, and racial and ethnic make-up data. This form allows users to enter licensing data such 0 - 120 years.

2. **Funds Received – SNP 4**

   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

3. **Meal Policy Statement – FRPS1**

   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

4. **Pre-Award Compliance Review – SNP6**

   a. This form contains information regarding Title VI compliance information.

5. **Public Release Verification – SNP7**

   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.

   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

6. **CACFP Agreement – CASA1**

   a. The **CACFP Agreement** contains participant rules and responsibilities for taking part in the child and adult care food program.

7. **Officers and Employees – SNP3**

   a. Applicants will list board member, owner, and employee information on this form.

8. **Adult Questionnaire (if applicable) – APQ1**

   a. Representatives of Adult Care facilities are required to complete the Adult Questionnaire.

9. **Application Questionnaire – AQ1**

   a. This form is used to allow the user to answer questions regarding the business's integrity.

10. **Administrative Budget – CAAB1**

   a. All applicants must complete a 12-month administrative budget based on the current facility enrollment. This must be received and approved by the state agency prior to application processing.

11. **Disclosure of Lobbying Act – SFLLL**

   a. This Federal form is for all participants. If it does not apply, sign and date.

8.1.2 Paper Documents

Below is a listing of each paper document listed on the *CACFP for Profit Independent Child/Adult Care Center Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. This form is required when the user answers that they have a contract to provide their meals from the Local School System or Food Service Management Company on the Application for Participation – SNP5 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **List of Enrolled Children Eligible for Free or Reduced Priced Meal Reimbursement (25% Required)**
   a. Applicants are required to submit a list of enrolled children eligible for free or reduced meals.

5. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. **Child or Adult Care Center License(s)**
   a. The applicant is required to submit verification that they are licensed by the State of Arkansas.

7. **Most recent IRS Tax Form (first page and signature page sufficient) and documentation of last 2 quarters of payroll taxes paid**
   a. Applicants are required to submit their tax and payroll information.

8. **Executive Order Disclosure Form**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

8.2 Non Profit Child Care Centers

8.2.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figure 8.2-1a-1b*)

Figure 8.2-1a – CACFP Non-Profit Independent Checklist

Figure 8.2-1b – CACFP Non-Profit Independent Checklist

Below is a listing of each on-line document:

1. **Application for Participation – SNP 5**
   a. This form contains the general provider information, facility operating data, meal service data, facility directions, child and adult day care information, food service patterns, and racial and ethnic make-up data. This form allows users to enter licensing data such 0 - 120 years.

2. **Funds Received – SNP 4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

3. **Meal Policy Statement – FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

4. **Pre-Award Compliance Review – SNP6**
   a. This form contains information regarding Title VI compliance information.

5. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

6. **CACFP Agreement – CASA1**
   a. The CACFP Agreement contains participant rules and responsibilities for taking part in the child and adult care food program.

7. **Officers and Employees – SNP3**
   a. Applicants will list board member, owner and employee information on this form.

8. **Adult Questionnaire (if applicable) – APQ1**
   a. Representatives of Adult Care facilities are required to complete the Adult Questionnaire.

9. **Application Questionnaire – AQ1**
   a. This form is used to allow the user to answer questions regarding the business's integrity.

10. **Administrative Budget – CAAB1**

a. All applicants must complete a 12-month administrative budget based on the current facility enrollment. This must be received and approved by the state agency prior to application processing.

11. **Disclosure of Lobbying Act – SFLLL**
    a. This Federal form is for all participants. If it does not apply, sign and date.

8.2.2 Paper Documents

Below is a listing of each paper document listed on the *CACFP Nor-Profit Independent Child/Adult Care Center Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. This form is required when the user answers that they have a contract to provide their meals from the Local School System or Food Service Management Company on the Application for Participation – SNP5 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **IRS Tax Exempt Letter**
   a. Applications are required to submit proof that they are a tax exempt business.

5. **Most Recent Board Meeting Minutes**
   a. Applicants must submit their most recent board meeting minutes with their application.

6. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

7. **Child or Adult Care License(s)**
   a. Applicants will submit verification of their child care licenses.

8. **Articles of Incorporation**
   a. Applicants must submit verification of their Articles of Incorporation for their business.

9. **Most Recent IRS Tax Form**

a. Applicants shall submit documentation of the last 2 quarters of payroll taxes paid and their most recent IRS Tax Form.

10. **Executive Order Disclosure Form – EO9804**

a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

8.3 Home Sponsoring Organizations

8.3.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 8.3-1a-1b*)
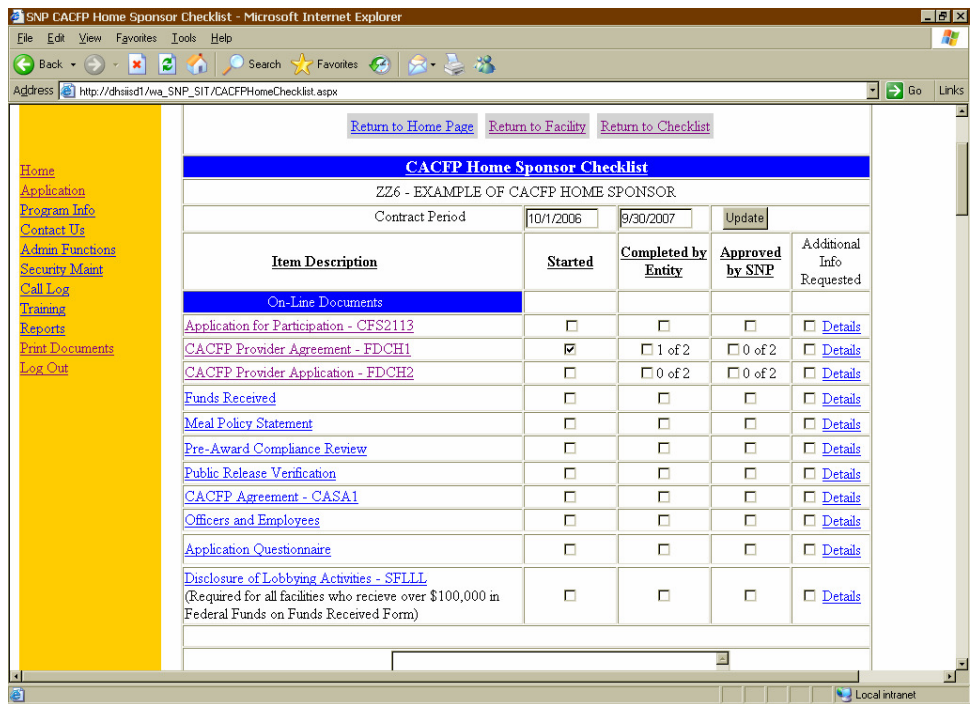
Figure 8.3-1a – Home Sponsor Checklist

Figure 8.3-1b – Home Sponsor Checklist

Below is a listing of each on-line document:

1. **Application for Participation – CFS2113**
    a. This form contains the administrative budget for the home sponsoring organization.

2. **CACFP Provider Agreement – FDCH1**
    a. This list displays all of the homes the sponsor is associated with. The user shall select the home through the Site Application Checklist for the FDCH1.
    b. The FDCH1 is the agreement for the homes assigned to the sponsoring organization.

3. **CACFP Provider Application – FDCH2**
    a. This list displays all of the homes the sponsor is associated with. The user shall select the home through the Site Application Checklist for the FDCH2.
    b. The FDCH2 is the application for participation for the homes assigned to the sponsoring organization. This form allows users to enter licensing data such 0 - 120 years.

4. **Funds Received – SNP4**
    a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

5. **Meal Policy Statement - FRPS1**

a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

6. **Pre-Award Compliance Review – SNP6**
   a. This form contains information regarding Title VI compliance information.

7. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

8. **CACFP Agreement – CASA1**
   a. The CACFP Agreement contains participant rules and responsibilities for taking part in the child and adult care food program.

9. **Officers and Employees – SNP3**
   a. Applicants will list board member, owner and employee information on this form.

10. **Application Questionnaire**
    a. This form is used to allow the user to answer questions regarding the business's integrity.

11. **Disclosure of Lobbying Act – SFLLL**
    a. This Federal form is for all participants. If it does not apply, sign and date.

8.3.2 Paper Documents

Below is a listing of each paper document listed on the *CACFP Home Sponsor Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

3. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

4. **Child or Adult Care License(s) Most Recent IRS Tax**
   a. Applicants will submit verification of their child care licenses.

5. **Most Recent IRS Tax Form**
   a. Applicants will submit documentation of the last 2 quarters of payroll taxes paid and their most recent IRS tax form.

6. **Executive Order Disclosure Form – EO9804**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

8.4 Center Sponsoring Organizations

8.4.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 8.4-1a-1b*)

Figure 8.4-1a – Center Sponsor Checklist

Figure 8.4-1b – Center Sponsor Checklist

Below is a listing of each on-line document:

1. **Application for Participation – CFS2113**
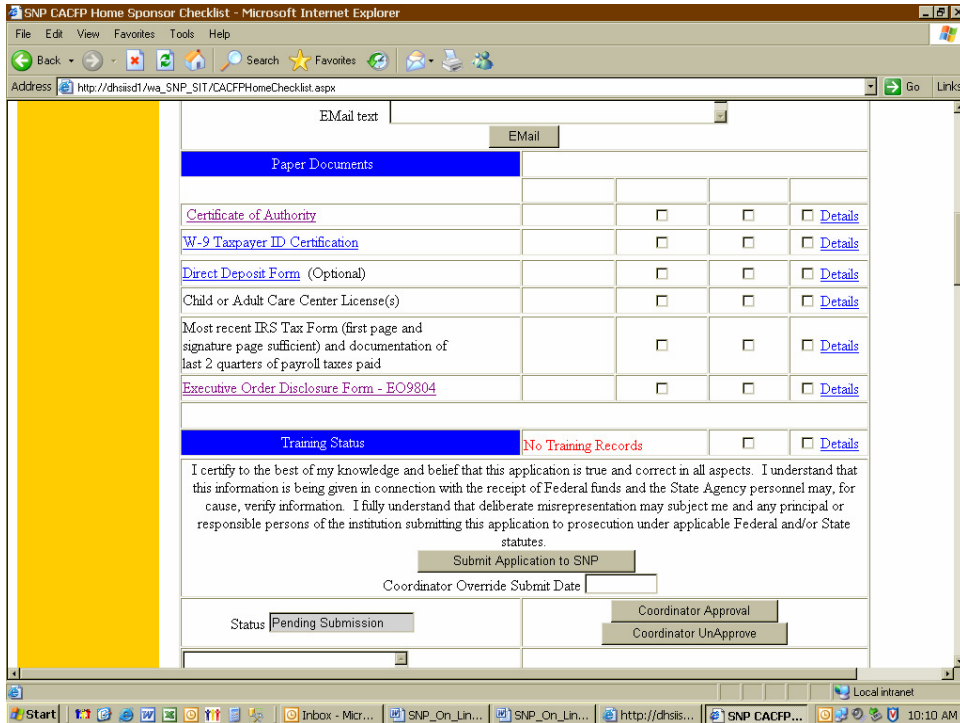   a. This form contains the administrative budget for the center sponsoring organization.

2. **Application for Participation – SNP 5**
   a. This list displays all of the homes the sponsor is associated with. The user shall select the home through the Site Application Checklist for the SNP5.
   b. This form contains the general provider information, facility operating data, meal service data, facility directions, child and adult day care information, food service patterns, and racial and ethnic make-up data. This form allows users to enter licensing data such 0 - 120 years.

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Meal Policy Statement - FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. **Pre-Award Compliance Review – SNP6**
   a. This form contains information regarding Title VI compliance information.

6. **Public Release Verification – SNP7**
    a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
    b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **CACFP Agreement – CASA1**
    a. The CACFP Agreement contains participant rules and responsibilities for taking part in the child and adult care food program.

8. **Officers and Employees – SNP3**
    a. Applicants will list board member, owner and employee information on this form.

9. **Adult Questionnaire – APQ1**
    a. Representatives of Adult Care facilities are required to complete the Adult Questionnaire.

10. **Application Questionnaire**
    a. This form is used to allow the user to answer questions regarding the business's integrity.

11. **Disclosure of Lobbying Act – SFLLL**
    a. This Federal form is for all participants. If it does not apply, sign and date.

8.4.2 Paper Documents

Below is a listing of each paper document listed on the *CACFP Sponsor of Child/Adult Care Centers Checklist*:

1. **Certificate of Authority**
    a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement of behalf of the named institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
    a. This form is required if the user indicated on the Application for Participation SNP5 that the method by which the meals will be provided is via contracts.

3. **W-9 Request for Tax Payer Identification Number and Certification**
    a. Applicants must complete this form.

4. **IRS Tax Exempt Letter**
    a. Applications are required to submit this information if they are a non-profit organization.

5. Direct Deposit Form

    a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. Child or Adult Care License(s)

    a. Applicants will submit verification of their child care licenses.

7. Articles of Incorporation

    a. Applications are required to submit this information if they are a non-profit organization.

8. Most Recent IRS Tax Form

    a. Applicants will submit documentation of the last 2 quarters of payroll taxes paid and their most recent IRS tax form.

9. Executive Order Disclosure Form – EO9804

    a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

9 National School Lunch Program (NSLP)

The National School Lunch Program is a federally assisted meal program operating in more than 99,800 public, non-profit private schools, and residential child care institutions. Depending upon the type of business, they are categorized as pricing or non-pricing organizations. If the organization has multiple sites, they are considered business organizations, whereas individual schools and childcare institutions are deemed independents.

Each section will give a synopsis of the forms for each specific checklist. However, all of the forms will work the same. There are two types of forms: Online Documents and Paper Documents.

With the Online Documents, when the user starts a form, the system will automatically check the Started check box. When the form is submitted, the system will check the Completed by Entity checkbox. With the Paper Documents, the user will be required to manually select the Completed by Entity checkbox when they send in their paper documents to SNP Central Office.

The user shall complete the Online Documents and select the Submit button to electronically submit the form to the user's checklist. In some instances, the form may be information that must be read. The submit button for that form may read as "I Have Read and Understand This Form" or similar wording. Some forms may span additional pages, due to their length. Each form will give the user the opportunity to print the document for their records. Some forms will allow the user to copy data from one year to the next.

The Paper Documents section has links to allow the user to print PDF documents to be completed and returned to SNP Central Office. However, depending on the program, some information may not require a form.

9.1 NSLP Independent LEA Non-Pricing

9.1.1 On-Line Documents
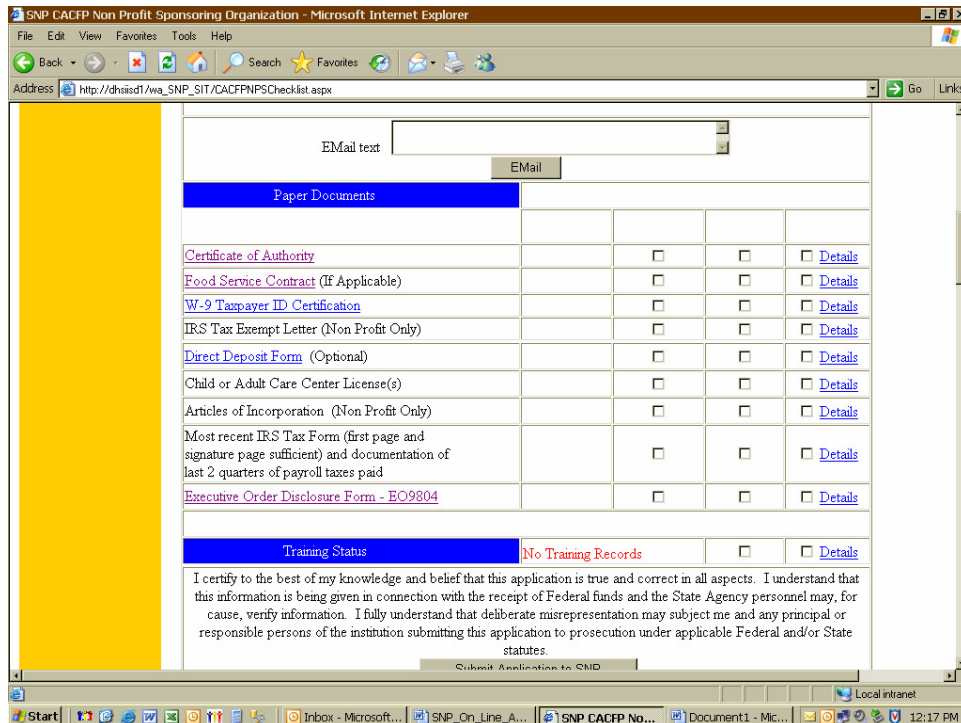
The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 9.1-1a-1b*)

Figure 9.1-1a – NSLP Independent Non-Pricing Checklist

Figure 9.1-1b – NSLP Independent Non-Pricing Checklist

Below is a listing of each on-line document:

1. **NSLP Application for Participation – 2134I**

a. This form shall be completed for all businesses with only one facility/school, which identifies information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option.

2. **Funds Received – SNP 4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

3. **Non-Pricing Policy Statement for Free and Reduced Price Meals and/or Milk Programs – NSL2152**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

4. **Pre-Award Compliance Review – SNP6**
   a. This form contains information regarding Title VI compliance information.

5. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

6. **NSLP After School Agreement**
   a. This form contains information regarding USDA requirements to provide reimbursable snacks for the After School Snack Program.

7. **Officers and Employees – NSLP3**
   a. Applicants will list board member, owner and employee information on this form.

8. **NSLP, SBP and SMP Agreement - 2136**
   a. This Agreement contains participant rules and responsibilities for taking part in the National School Lunch Program, Special Milk Program, and School Breakfast Program.

9.1.2 Paper Documents

Below is a listing of each paper document listed on the *NSLP, SBP and SMP Independent LEA Non-Pricing Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered that they have a contract for meals on the NSLP Application for Participation – 2134I form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Executive Order Disclosure Form**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

5. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

9.2 NSLP Independent LEA Pricing

9.2.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 9.2-1a-1b*)

Figure 9.2-1a – NSLP Independent LEA Pricing Checklist

Figure 9.2-1b – NSLP Independent LEA Pricing Checklist

Below is a listing of each on-line document:

1. **NSLP Application for Participation – SNP 2134I**
   a. This form shall be completed for all businesses with only one facility/school, which identifies information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option.

2. **Funds Received – SNP 4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

3. **Pricing Policy Statement for Free and Reduced Price Meals and/or Milk Programs – NSL2137**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

4. **Pre-Award Compliance Review – SNP6**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

5. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.

b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

6. **NSLP After School Snack Agreement**
   a. This form contains information regarding USDA requirements to provide reimbursable snacks for the After School Snack Program.

7. **Officers and Employees – NSLP3**
   a. Applicants will list board member, owner and employee information on this form.

8. **NSLP, SBP and SMP Agreement - 2136**
   a. This Agreement contains participant rules and responsibilities for taking part in the National School Lunch Program, Special Milk Program, and School Breakfast Program.

9.2.2 Paper Documents

Below is a listing of each paper document listed on the *NSLP, SBP, and SMP Independent LEA Pricing Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement of behalf of the named institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered that they have a contract for meals on the NSLP Application for Participation – 2134I form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

5. **Executive Order Disclosure Form – EO9804**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

9.3 NSLP Business LEA Non-Pricing

9.3.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 9.3-1a-1b*)
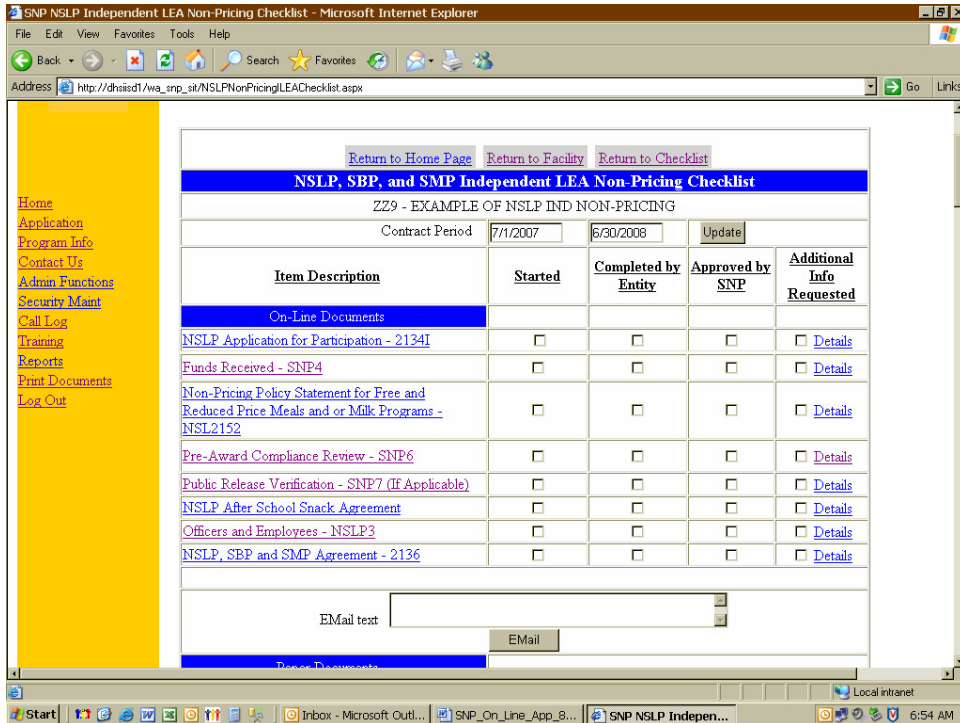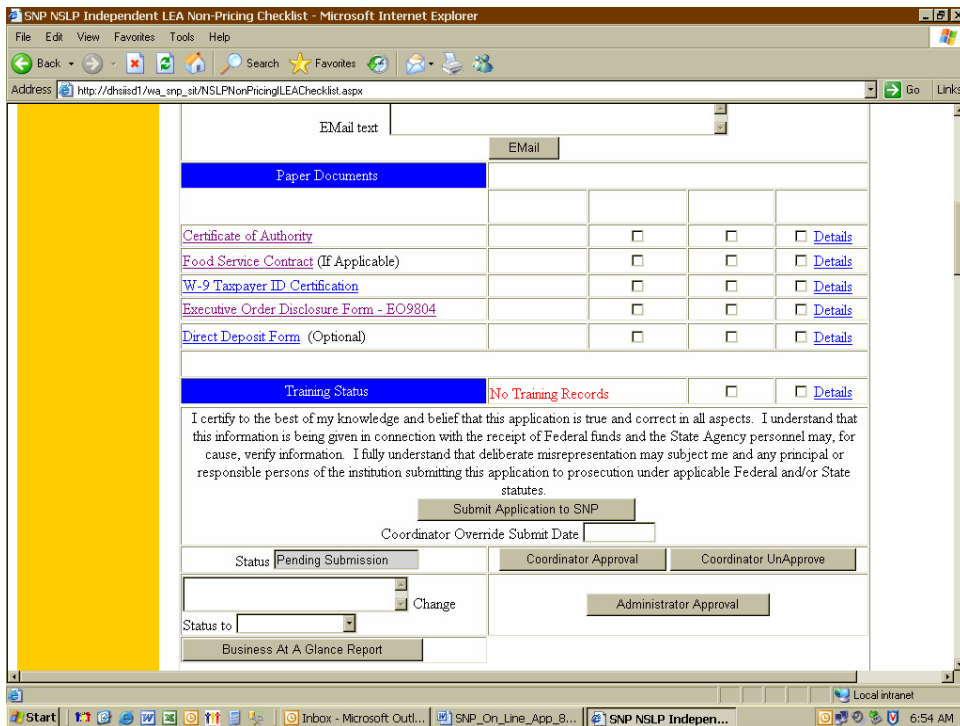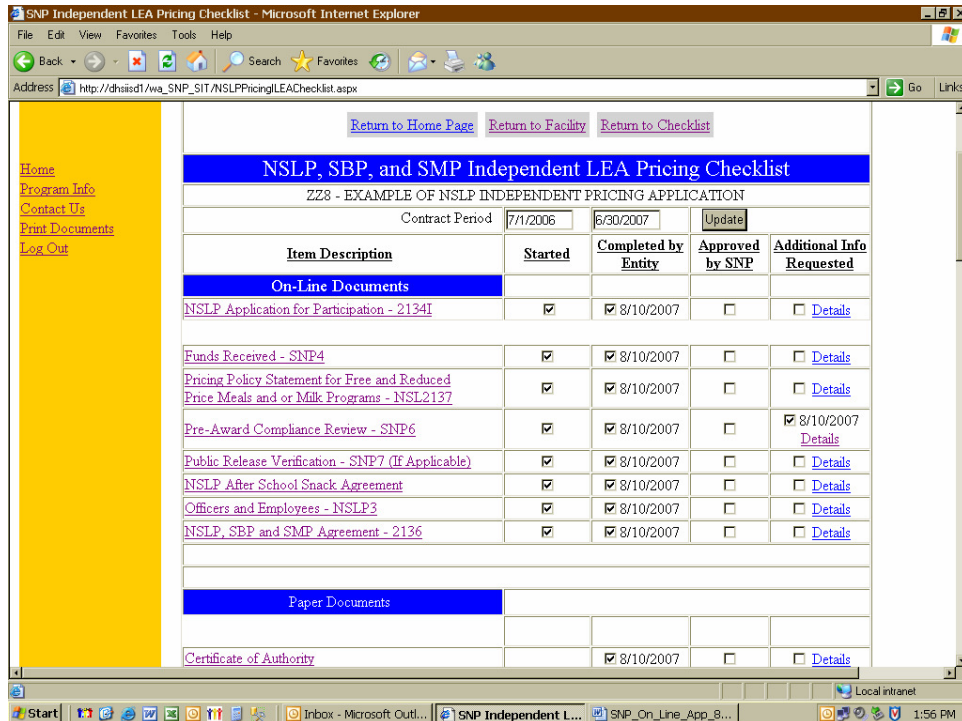
Figure 9.3-1a – NSLP Business LEA Non-Pricing Checklist

Figure 9.3-1b – NSLP Business LEA Non-Pricing Checklist

Below is a listing of each on-line document:

1. **NSLP Application for Participation – NSLP2134B**
   a. This form shall be completed for all businesses with more than one facility/school, which identifies information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option.

2. **NSLP Site Application – NSLP2134S**
   a. This list displays all of the sites the business is associated with. The user shall select the site through the Site Application Checklist for the SNP2134S.
   b. This form shall be completed for each site associated with the NSLP Sponsor applying for the National School Lunch Program. For each site, the user shall complete identifying information, including information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option.

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Non-Pricing Policy Statement for Free and Reduced Price Meals and/or Milk Programs – NSL2152**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

5. **Pre-Award Compliance Review – SNP6**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **NSLP After School Snack Agreement**
   a. This form contains information regarding USDA requirements to provide reimbursable snacks for the After School Snack Program.

8. **Officers and Employees – NSLP3**
   a. Applicants will list board member, owner and employee information on this form.

9. **NSLP, SBP and SMP Agreement – 2136**

a. This Agreement contains participant rules and responsibilities for taking part in the National School Lunch Program, Special Milk Program, and School Breakfast Program.

9.3.2 Paper Documents

Below is a listing of each paper document listed on the *NSLP, SBP, and SMP Business LEA Non-Pricing Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement of behalf of the named institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered that they have a contract for meals on the NSLP Application for Participation – 2134S form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Executive Order Disclosure Form – EO9804**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

5. **Executive Order Disclosure Form – EO9804**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.
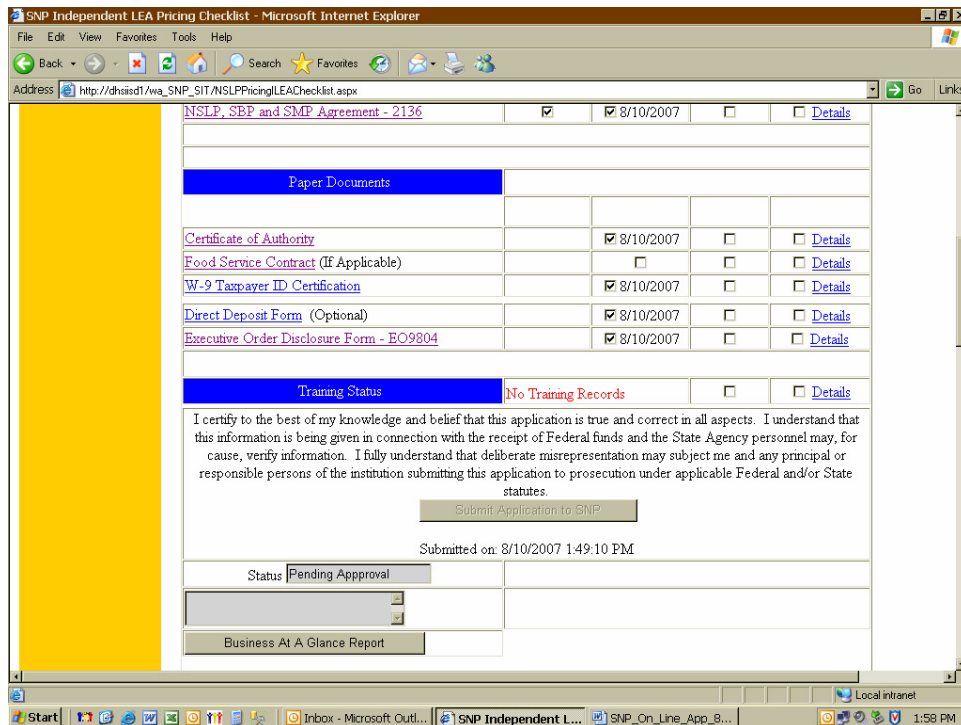
9.4 NSLP Business LEA Pricing

9.4.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 9.4-1a-1b*)
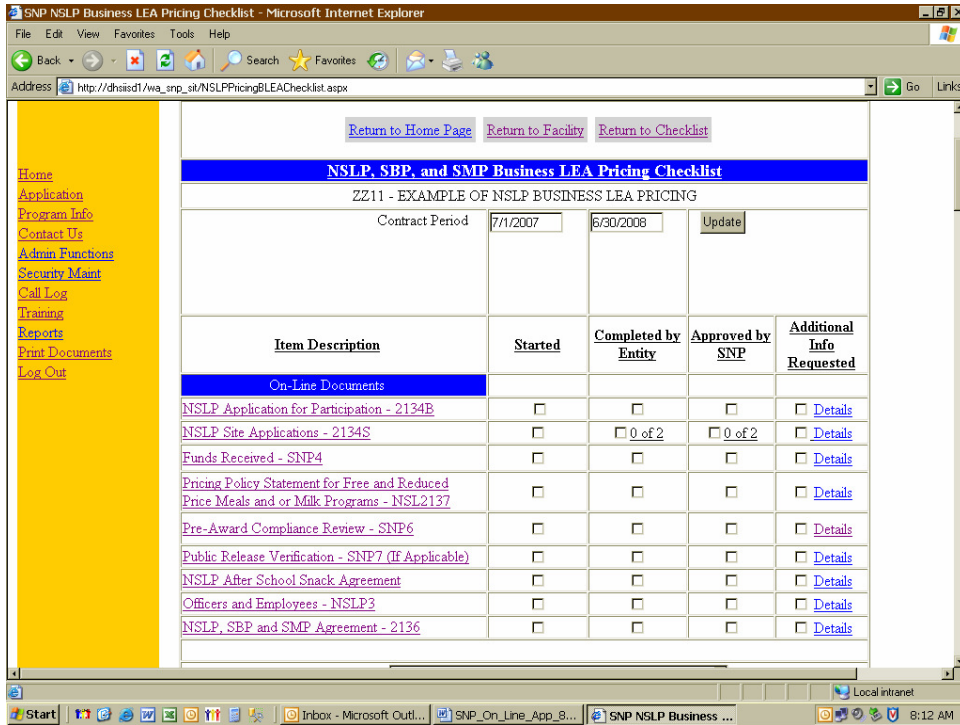
Figure 9.4-1a – NSLP Business LEA Pricing Checklist
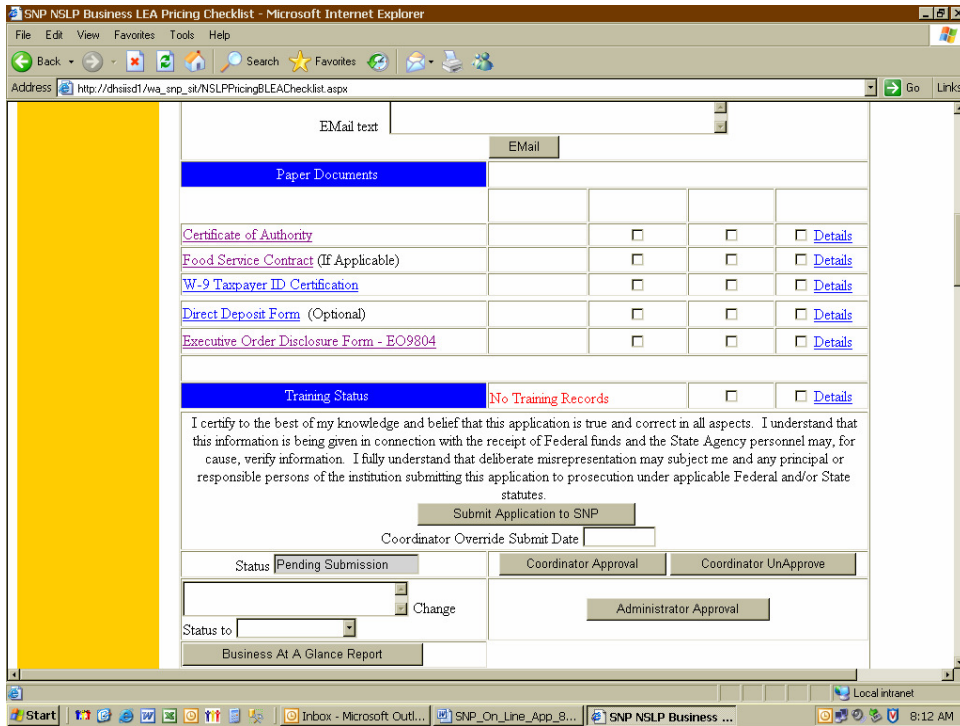
Figure 9.4-1b – NSLP Business LEA Pricing Checklist

Below is a listing of each on-line document:

1. **NSLP Application for Participation – 2134B**

a. This form shall be completed for all businesses with more than one facility/school, which identifies information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option.

2. **NSLP Site Applications – 2134S**
   a. This list displays all of the sites the business is associated with. The user shall select the site through the Site Application Checklist for the SNP2134S.
   b. This form shall be completed for each site associated with the NSLP Sponsor applying for the National School Lunch Program. For each site, the user shall complete identifying information, including information such as Facility/School Data, Enrollment Data, Food Service Data and Local Education Agency Option

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **NLSP Policy Statement for Free and Reduced Price Meals and/or Milk Programs – NSLP2137**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

5. **Pre-Award Compliance Review – SNP6**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **NSLP After School Snack Agreement**
   a. This form contains information regarding USDA requirements to provide reimbursable snacks for the After School Snack Program.

8. **Officers and Employees – NSLP3**
   a. Applicants will list board member, owner and employee information on this form.

9. **NSLP, SBP and SMP Agreement – 2136**
   a. This Agreement contains participant rules and responsibilities for taking part in the National School Lunch Program, Special Milk Program, and School Breakfast Program.

9.4.2 Paper Documents

Below is a listing of each paper document listed on the *NSLP, SBP, and SMP Business LEA Pricing Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement of behalf of the named institution for the operation of the SNP program for that facility.

2. **NSLP Food Service Contract**
   a. Applicants will be required to complete this form if they answered that they have a contract for meals on the NSLP Application for Participation – 2134S form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

5. **Executive Order Disclosure Form – EO9804**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required by all applicants.

10 Summer Food Service Program (SFSP)

The Summer Food Service Program is a federally funded program that provides nutritious meals and snacks to children during the summer months. The program helps eligible children receive the same high quality meals during the summer as they get during the school year. There are five types of Summer Food Programs:

1. Public school food authorities and non-profit private school food authorities
2. Public or non-profit private residential summer camps
3. Units of local, municipal, county, tribal or state government
4. Public or private non-profit colleges or universities which are currently participating in the National Youth Sports Programs
5. Private, non-profit (501[c][3]) organizations

Each section will give a synopsis of the forms for each specific checklist. However, all of the forms will work the same. There are two types of forms: Online Documents and Paper Documents.

With the Online Documents, when the user starts a form, the system will automatically check the Started check box. When the form is submitted, the system will check the Completed by Entity checkbox. With the Paper Documents, the user will be required to manually select the Completed by Entity checkbox when they send in their paper documents to SNP Central Office.

The user shall complete the Online Documents and select the Submit button to electronically submit the form to the user's checklist. In some instances, the form may be information that must be read. The submit button for that form may read as "I Have Read and Understand This Form" or similar wording. Some forms may span additional pages, due to their length. Each form will give the user the opportunity to print the document for their records. Some forms will allow the user to copy data from one year to the next.

The Paper Documents section has links to allow the user to print PDF documents to be completed and returned to SNP Central Office. However, depending on the program, some information may not require a form.

10.1 SFSP Colleges and Universities

10.1.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 10.1-1a-1b*)

Figure 10.1-1a – SFSP Colleges and Universities Checklist
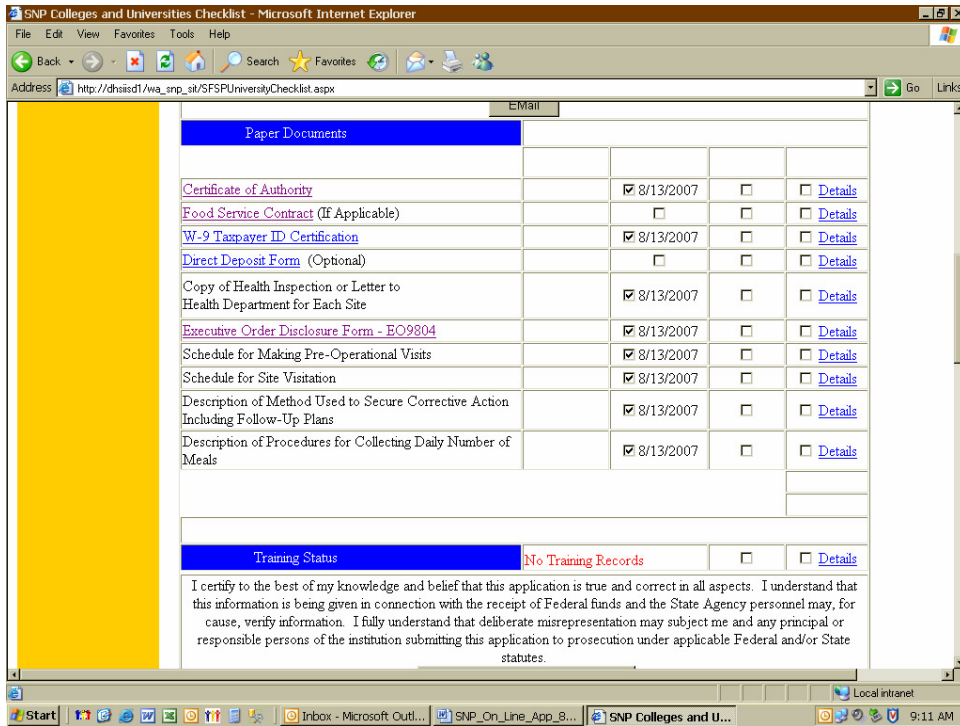
Figure 10.1-1b – SFSP Colleges and Universities Checklist

Below is a listing of each on-line document:

1. **SFSP Sponsor Application – 2160**

a. This form shall be completed for all businesses applying for the Summer Food Service Program. The user shall complete identifying information, including information such as Administrative and Operational budgets.

2. SFSP Site Applications – 2161

a. This list displays all of the sites the sponsor is associated with. The user shall select the site through the Site Application Checklist for the 2161.

b. This form shall be completed for all sites associated with the SFSP Sponsor. The user shall complete identifying information, including attendance and meal preparation methods.

3. Funds Received – SNP 4

a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. Meal Policy Statement – FRPS1

a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. Pre-Award Compliance Review – SNP6

a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. Public Release Verification – SNP7

a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.

b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. SFSP Agreement

a. The SFSP Agreement contains participant rules and responsibilities for taking part in the summer food program.

8. Officers and Employees – SFSP3

a. Applicants will list board member, owner and employee information on this form.

9. Disclosure of Lobbying Act – SFLLL

a. This Federal form is for all participants. If it does not apply, sign and date.

10.1.2   Paper Documents

Below is a listing of each paper document listed on the *SFSP Colleges and Universities Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered Contract with Food Service Management Company on the Site Application for Participation – SFSP2161 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

5. **Copy of Health Inspection or Letter to Health Department for Each Site**
   a. Applicants are required to submit copies of health inspections or letters from the health department.

6. **Executive Order Disclosure Form**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

7. **Schedule for Making Pre-Operational Visits**
   a. Applicants are required to submit a schedule of Pre-Operational Visits with their application packet.

8. **Schedule for Site Visitation**
   a. Applicants are required to submit a schedule of site visitation with their application packet.

9. **Description of Method Used to Secure Corrective Action Including Follow-Up Plans**
   a. Applicants are required to submit a description of the method used to secure corrective action, with follow-up plans with their application packet.

10. **Description of Procedures for Collecting Daily Number of Meals**
    a. Applicants are required to submit a description of their procedures for collecting their daily meal count.

10.2 SFSP Government Entities

10.2.1 On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 10.2-1a-1b*)
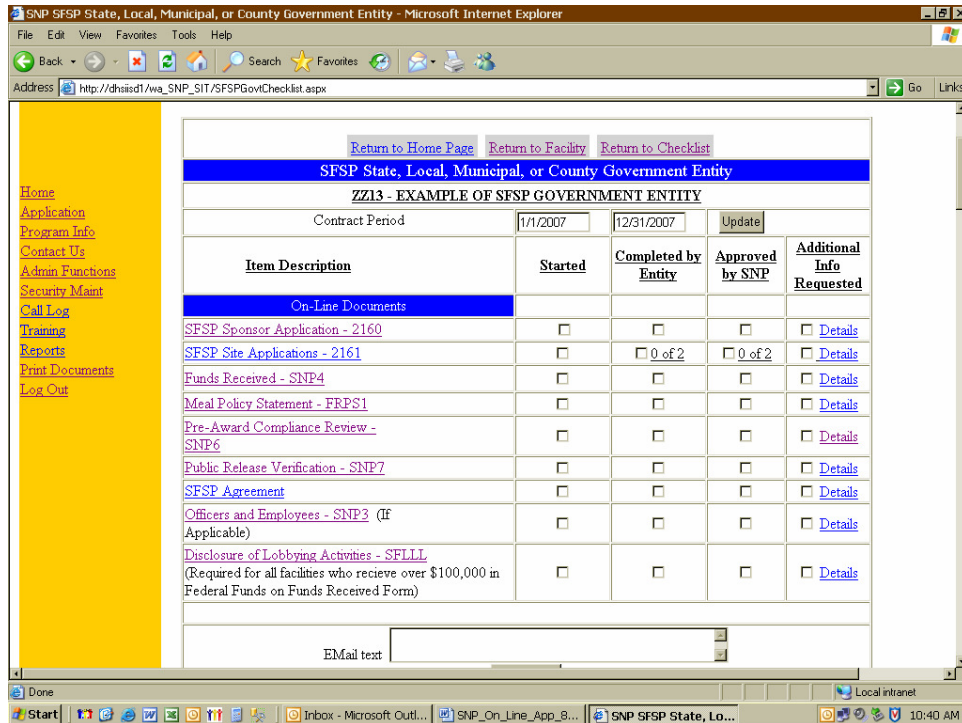
Figure 10.2-1a – SFSP Government Entity Checklist
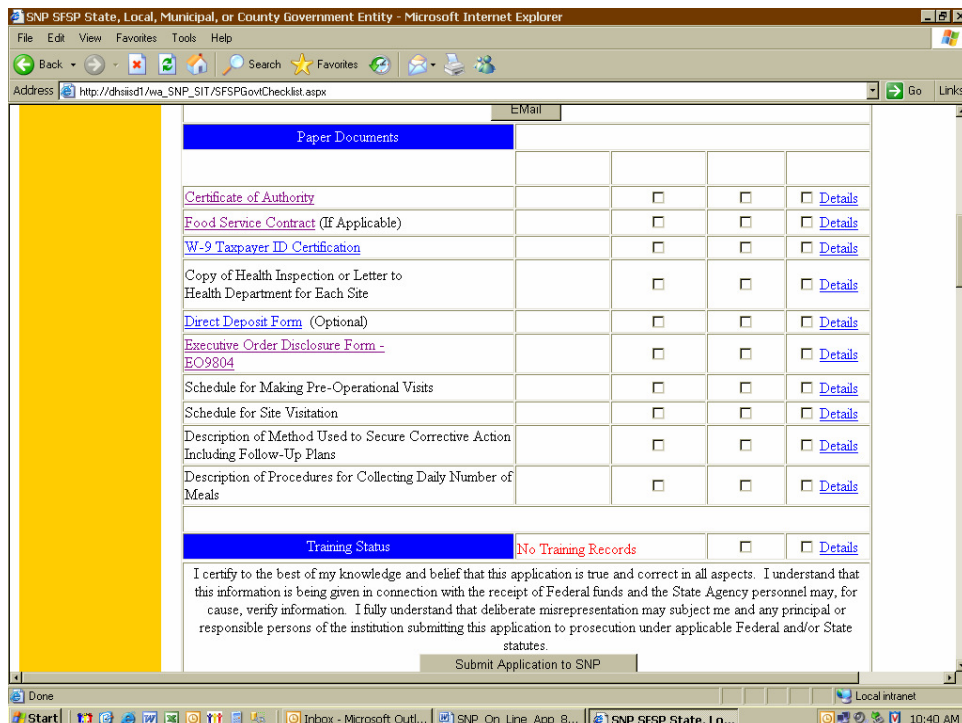
Figure 10.2-1b – SFSP Government Entity Checklist

Below is a listing of each on-line document:

1. **SFSP Sponsor Application – 2160**
   a. This form shall be completed for all businesses applying for the Summer Food Service Program. The user shall complete identifying information, including information such as Administrative and Operational budgets.

2. **SFSP Sponsor Application – 2161**
   a. This list displays all of the sites the sponsor is associated with. The user shall select the site through the Site Application Checklist for the 2161.

   b. This form shall be completed for all sites associated with the SFSP Sponsor. The user shall complete identifying information, including attendance and meal preparation methods.

3. **Funds Received – SNP 4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Meal Policy Statement – FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. **Pre-Award Compliance Review – SNP6**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **SFSP Agreement**
   a. The SFSP Agreement contains participant rules and responsibilities for taking part in the summer food program.

8. **Officers and Employees – SFSP3**
   a. Applicants will list board member, owner and employee information on this form.

9. **Disclosure of Lobbying Act – SFLLL**

a. This Federal form is for all participants. If it does not apply, sign and date.

10.2.2   Paper Documents

Below is a listing of each paper document listed on the *SFSP State, Local, Municipal, or County Government Entity Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered Contract with Food Service Management Company on the Site Application for Participation – SFSP2161 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **Copy of Health Inspection or Letter to Health Department for Each Site**
   a. Applicants are required to submit a copy of their most recent health inspection or letter from the health department for each of their sites.

5. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. **Executive Order Disclosure Form**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

7. **Schedule for Making Pre-Operational Visits**
   a. Applicants are required to submit a schedule of their Pre-Operational Visits.

8. **Schedule for Site Visitation**
   a. Applicants are required to submit a schedule of their site visitation.

9. **Description of Method Used to Secure Corrective Action Including Follow-Up Plans**
   a. Applicants are required to provide a description of the method they use to secure corrective action, including follow-up plans.

10. **Description of Procedures for Collecting Daily Number of Meals**

    a.   Applicants are required to provide a description of the procedures they use to gather their daily meal counts.

10.3 SFSP Local Education Agency

10.3.1   On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 10.3-1a-1b*)
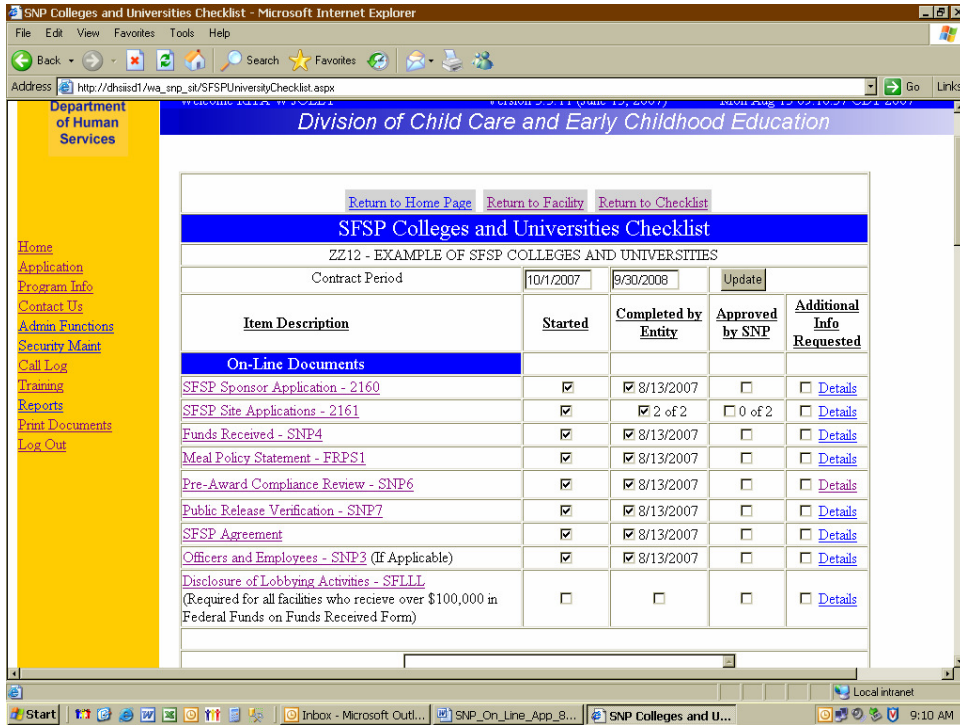

Figure 10.3-1a – SFSP Local Education Agency Checklist

Figure 10.3-1b – SFSP Local Education Agency Checklist

Below is a listing of each on-line document:

1. **SFSP Sponsor Application – 2160**
   a. This form shall be completed for all businesses applying for the Summer Food Service Program. The user shall complete identifying information, including information such as Administrative and Operational budgets.

2. **SFSP Sponsor Application – 2161**
   a. This list displays all of the sites the sponsor is associated with. The user shall select the site through the Site Application Checklist for the 2161.
   b. This form shall be completed for all sites associated with the SFSP Sponsor. The user shall complete identifying information, including attendance and meal preparation methods.

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Meal Policy Statement - FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. **Pre-Award Compliance Review – SNP6**

a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
    a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
    b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **SFSP Agreement**
    a. The SFSP Agreement contains participant rules and responsibilities for taking part in the summer food program.

8. **Officers and Employees – SFSP3**
    a. Applicants will list board member, owner and employee information on this form.

9. **Disclosure of Lobbying Act – SFLLL**
    a. This Federal form is for all participants. If it does not apply, sign and date.

10.3.2   *Paper Documents*

Below is a listing of each paper document listed on the *SFSP Public or Private Non Profit Local Education Agency Checklist*:

1. **Certificate of Authority**
    a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
    a. Applicants will be required to complete this form if they answered Contract with Food Service Management Company on the Site Application for Participation – SFSP2161 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
    a. Applicants must complete this form.

4. **IRS Tax Exempt Letter**
    a. Applicants are required to submit verification of their tax exempt status.

5. **Direct Deposit Form**
    a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. **Executive Order Disclosure Form**

   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

7. **Schedule for Making Pre-Operational Visits**

   a. Applicants are required to submit a schedule of their Pre-Operational Visits.

8. **Copy of Health Inspection or Letter to Health Department for Each Site**

   a. Applicants are required to submit a copy of their most recent health inspection for each site or a letter from the health department.

9. **Schedule for Site Visitation**

   a. Applicants are required to submit a schedule of their site visitations.

10. **Description of Method Used to Secure Corrective Action Including Follow-Up Plans**

    a. Applicants are required to provide a description of the methods they used to secure corrective action, including follow-up for their sites.

11. **Description of Procedures for Collecting Daily Number of Meals**

    a. Applicants are required to provide their procedures for collecting their daily meal counts.

10.4 SFSP Other Private Non-Profits

10.4.1   On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 10.4-1a-1b*)

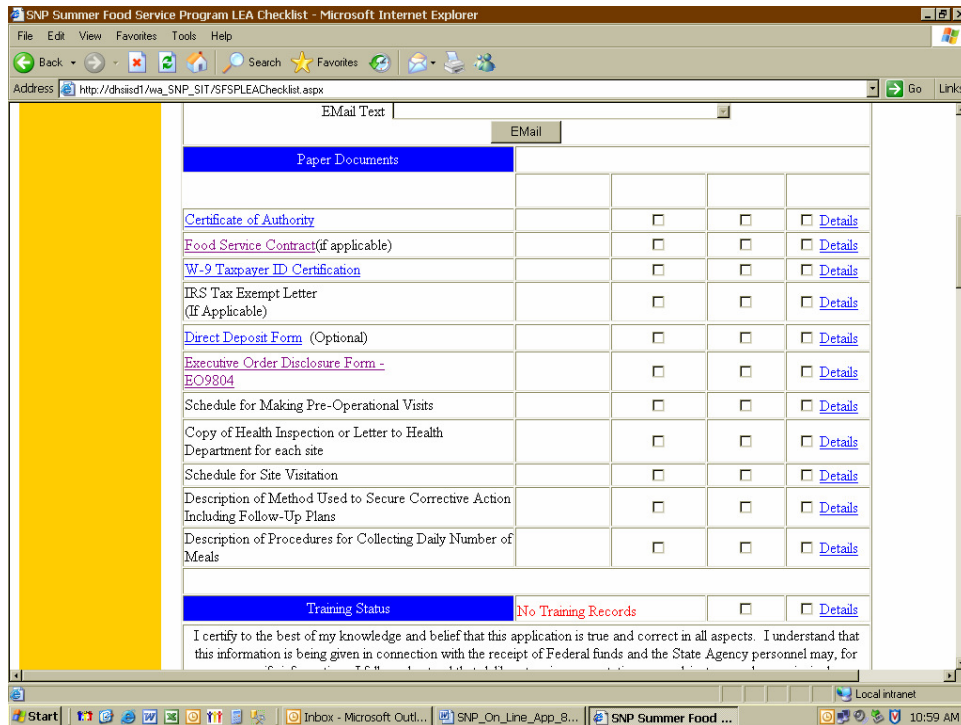Return to Home Page | Return to Facility | Return to Checklist

SFSP Other Non Profit Entity

ZZ15 - EXAMPLE OF SFSP OTHER PRIVATE NON-PROFIT

Contract Period 1/1/2007 12/31/2007 Update

Item Description	Started	Completed by Entity	Approved by SNP	Additional Info Requested
On-Line Documents				
SFSP Sponsor Application - 2160	☐	☐	☐	☐ Details
SFSP Site Applications - 2161	☐	☐ 0 of 2	☐ 0 of 2	☐ Details
Funds Received - SNP4	☐	☐	☐	☐ Details
Meal Policy Statement - FRPS1	☐	☐	☐	☐ Details
Pre-Award Compliance Review - SNP6	☐	☐	☐	☐ Details
Public Release Verification - SNP7	☐	☐	☐	☐ Details
SFSP Agreement	☐	☐	☐	☐ Details
Officers and Employees - SNP3 (If Applicable)	☐	☐	☐	☐ Details
Disclosure of Lobbying Activities - SFLLL (Required for all facilities who recieve over $100,000 in Federal Funds on Funds Received Form)	☐	☐	☐	☐ Details

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Figure 10.4-1a – SFSP Other Private Non-Profit Checklist

Paper Documents				
Certificate of Authority		☐	☐	☐ Details
Food Service Contract (If Applicable)		☐	☐	☐ Details
W-9 Taxpayer ID Certification		☐	☐	☐ Details
IRS Tax Exempt Letter		☐	☐	☐ Details
Direct Deposit Form (Optional)		☐	☐	☐ Details
Copy of Health Inspection or Letter to Health Department for Each Site		☐	☐	☐ Details
Executive Order Disclosure Form - EO9804		☐	☐	☐ Details
Schedule for Making Pre-Operational Visits		☐	☐	☐ Details
Schedule for Site Visitation		☐	☐	☐ Details
Description of Method Used to Secure Corrective Action Including Follow-Up Plans		☐	☐	☐ Details
Description of Procedures for Collecting Daily Number of Meals		☐	☐	☐ Details
Training Status	No Training Records		☐	☐ Details

I certify to the best of my knowledge and belief that this application is true and correct in all aspects. I understand that this information is being given in connection with the receipt of Federal funds and the State Agency personnel may, for cause, verify information. I fully understand that deliberate misrepresentation may subject me and any principal or responsible persons of the institution submitting this application to prosecution under applicable Federal and/or State statutes.

Submit Application to SNP

Figure 10.4-1b – SFSP Other Private Non-Profit Checklist

Below is a listing of each on-line document:

1. **SFSP Sponsor Application – 2160**

a. This form shall be completed for all businesses applying for the Summer Food Service Program. The user shall complete identifying information, including information such as Administrative and Operational budgets.

2. **SFSP Sponsor Application – 2161**
   a. This list displays all of the sites the sponsor is associated with. The user shall select the site through the Site Application Checklist for the 2161.
   b. This form shall be completed for all sites associated with the SFSP Sponsor. The user shall complete identifying information, including attendance and meal preparation methods.

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Meal Policy Statement - FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. **Pre-Award Compliance Review – SNP6**
   a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper document the user would send to the news media.

7. **SFSP Agreement**
   a. The SFSP Agreement contains participant rules and responsibilities for taking part in the summer food program.

8. **Officers and Employees – SNP3**
   a. Applicants will list board member, owner and employee information on this form.

9. **Disclosure of Lobbying Act – SFLLL**
   a. This Federal form is for all participants. If it does not apply, sign and date.

10.4.2   Paper Documents

Below is a listing of each paper document listed on the *SFSP Colleges and Universities Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered Contract with Food Service Management Company on the Site Application for Participation – SFSP2161 form. The user can select the *Food Service Contract* hyperlink to print the form from the checklist.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **IRS Tax Exempt Letter**
   a. Applicants are required to provide a letter from the IRS validating their tax exempt status.

5. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. **Copy of Health Inspection or Letter to Health Department for Each Site**
   a. Applicants are required to submit their most recent health inspections for each site, or a letter from the health department.

7. **Executive Order Disclosure Form**
   a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

8. **Schedule for Making Pre-Operational Visits**
   a. Applicants are required to submit a schedule of their pre-operational visits.

9. **Schedule for Site Visitation**
   a. Applicants are required to submit a schedule of their site visitation schedule.

10. **Description of Method Used to Secure Corrective Action Including Follow-Up Plans**
    a. Applicants are required to provide a description of the method the business uses to secure corrective action, including follow up plans.

11. **Description of Procedures for Collecting Daily Number of Meals**

a. Applicants are required to provide a description of the procedures the business uses to collect the daily meal count.

10.5 SFSP Residential Summer Camps

10.5.1   On-Line Documents

The user shall select their application from the Application Main form. This will redirect the user to their checklist. (see *Figures 10.5-1a-1b*)

Figure 10.5-1a – SFSP Summer Camp Checklist

Figure 10.5-1b – SFSP Summer Camp Checklist

Below is a listing of each on-line document:

1. **SFSP Sponsor Application - 2160**
   a. This form shall be completed for all businesses applying for the Summer Food Service Program. The user shall complete identifying information, including information such as Administrative and Operational budgets.

2. **SFSP Sponsor Application – 2161**
   a. This list displays all of the sites the sponsor is associated with. The user shall select the site through the Site Application Checklist for the 2161.
   b. This form shall be completed for all sites associated with the SFSP Sponsor. The user shall complete identifying information, including attendance and meal preparation methods.

3. **Funds Received – SNP4**
   a. This form contains the state, local, and federal funds received during the previous fiscal year. This form also includes the annual audit information required for participating organizations that receive more than $100,000 per year in state and/or Federal funds.

4. **Meal Policy Statement - FRPS1**
   a. This statement assures that all children and/or adult participants in attendance will be offered the same meals as non-participants and that there will be no discrimination against any child and/or adult.

5. **Pre-Award Compliance Review – SNP6**

a. This statement assures that all participants in attendance will be offered the same meals as non-participants.

6. **Public Release Verification – SNP7**
   a. This form must be completed by participating facilities to satisfy USDA Regulations that all SNP participants submit an annual public release to the news media.
   b. The hyperlink, *Public Release Form SNP-8*, redirects the user to a paper form to send to the news media.

7. **SFSP Agreement**
   a. The SFSP Agreement contains participant rules and responsibilities for taking part in the summer food program.

8. **Officers and Employees**
   a. Applicants will list board member, owner and employee information on this form.

9. **Disclosure of Lobbying Act – SFLLL**
   a. This Federal form is for all participants. If it does not apply, sign and date.

10.5.2   Paper Documents

Below is a listing of each paper document listed on the *SFSP Summer Camp Checklist*:

1. **Certificate of Authority**
   a. Applicants complete the Certificate of Authority to certify that the listed applicant representative has authorization to enter into an agreement on behalf of the institution for the operation of the SNP program for that facility.

2. **Food Service Contract**
   a. Applicants will be required to complete this form if they answered Contract with Food Service Management Company on the Site Application for Participation – SFSP2161 form.

3. **W-9 Request for Tax Payer Identification Number and Certification**
   a. Applicants must complete this form.

4. **IRS Tax Exempt Letter**
   a. Applicants are required to submit verification of tax exempt status from the IRS.

5. **Direct Deposit Form**
   a. Applicants that would like to enroll to receive their reimbursements by direct deposit or participants that need to change their direct deposit information will complete the Direct Deposit form.

6. **Executive Order Disclosure Form**

a. Applicants that were previously a member of the general assembly, constitutional officer, board or commission member, state employee, of the spouse or immediate family member of any of the previously listed persons must complete this disclosure. This form is required to be completed by all applicants.

7. **Copy of Health Inspection or Letter to Health Department for Each Site**
   a. Applicants are required to submit a copy of the most recent health inspection for each site or a letter from the health department.

8. **Schedule for Making Pre-Operational Visits**
   a. Applicants are required to submit the business's pre-operational visits schedule.

9. **Schedule for Site Visitation**
   a. Applicants are required to submit the business's site visitation schedule.

10. **Description of Method Used to Secure Corrective Action Including Follow-Up Plans**
    a. Applicants are required to provide a description of the business's method they used to secure corrective action, including their follow-up plans.

11. **Description of Procedures for Collecting Daily Number of Meals**
    a. Applicants are required to provide a description of the procedures the business used to collect the daily meal count.

11 Application Approval Process

Note: This section is geared to understanding the approval process. Although the Business User will be unable to view the steps for the approval process in their system, an understanding of the process will better familiarize the user as to the steps the SNP User must complete to process the application.

The SNP Coordinator can review the application has been completed and all forms have been submitted by the business entity and approve the individual forms, request additional information from the business entity, and dispose of the application (Approve / Deny). To review the application, request additional information, and approve the application, the SNP Coordinator will do the following:

1. The SNP User will log on to the SNP On-Line application by selecting the *Existing User Log-in* hyperlink and enter the assigned username and password. Alerts shall be displayed in the user's Alerts data grid, notifying the coordinator of the applications that have been submitted for processing. The user can access the facility and go to the application through the alert.

2. Alternately, the Coordinator can select the *Application* hyperlink located in the main menu on the left hand side of the screen to complete a search for applications. (see *Figure 11.1-1*)
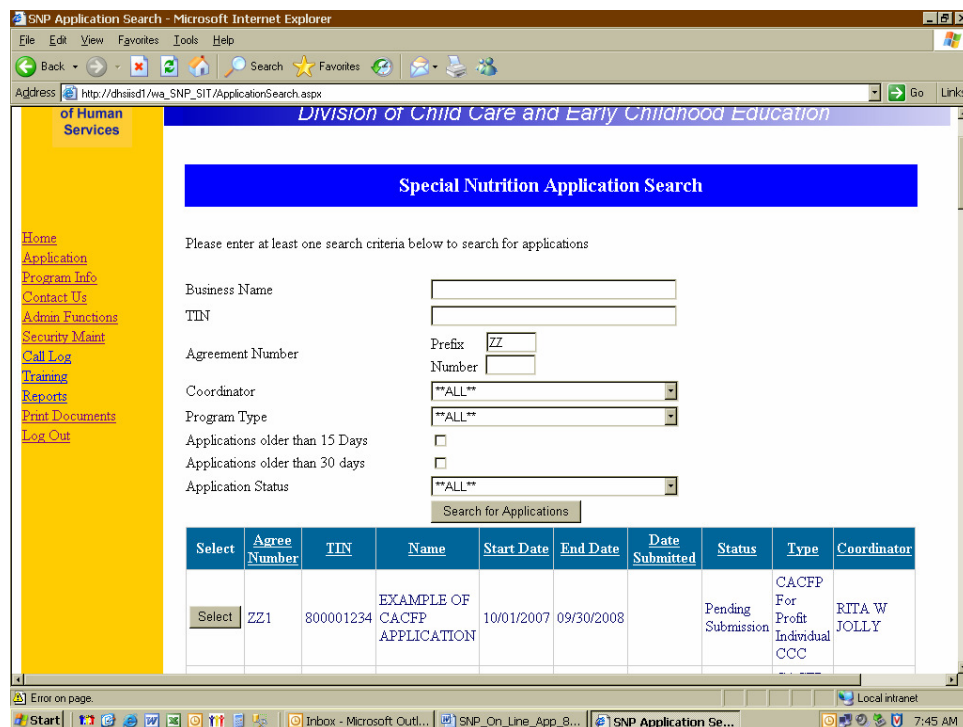
Figure 11.1-1 – Application Search

    a. A list of all applications that meet the search criteria will be displayed in the application data grid.

3. The Coordinator will view the checklist for the desired business by selecting the business to be accessed.

4. The Coordinator is redirected to the business's application checklist. The user will review each form submitted and will approve the form or request information. (see *Figure 11.1-2*)
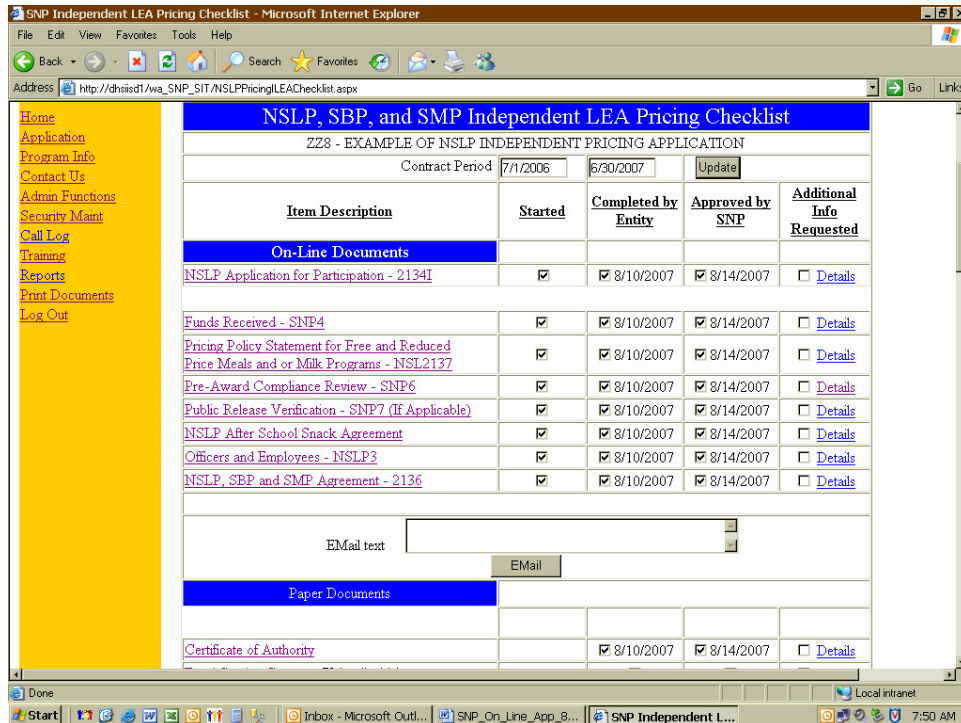
Figure 11.1-2 – Example of approved forms

5. Once all forms have been approved, the SNP coordinator can approve the application or reject the application. (see *Figure 11.1-3*)

   a. An alert will be sent to the SNP Administrator notifying that person that the application has been approved or denied.

   b. The Program Coordinator or the SNP Administrator can submit the Administrator approval on the application. An alert will go to the facility notifying them of approval of their application.

   c. The Coordinator Approval sends an alert to the Program Administrator, who must give the application final approval.

      i. When Coordinator Approval button is selected, a date will display verifying the date and time the Coordinator approved the checklist.

      ii. The Program Administrator and Program Coordinators can select the Administrator Approval button.

      iii. Once approved, the Business will receive an alert and email notifying of the approval of the application.

      iv. When the Administrator Approval button is selected, the date and time will display verifying the application approval date.
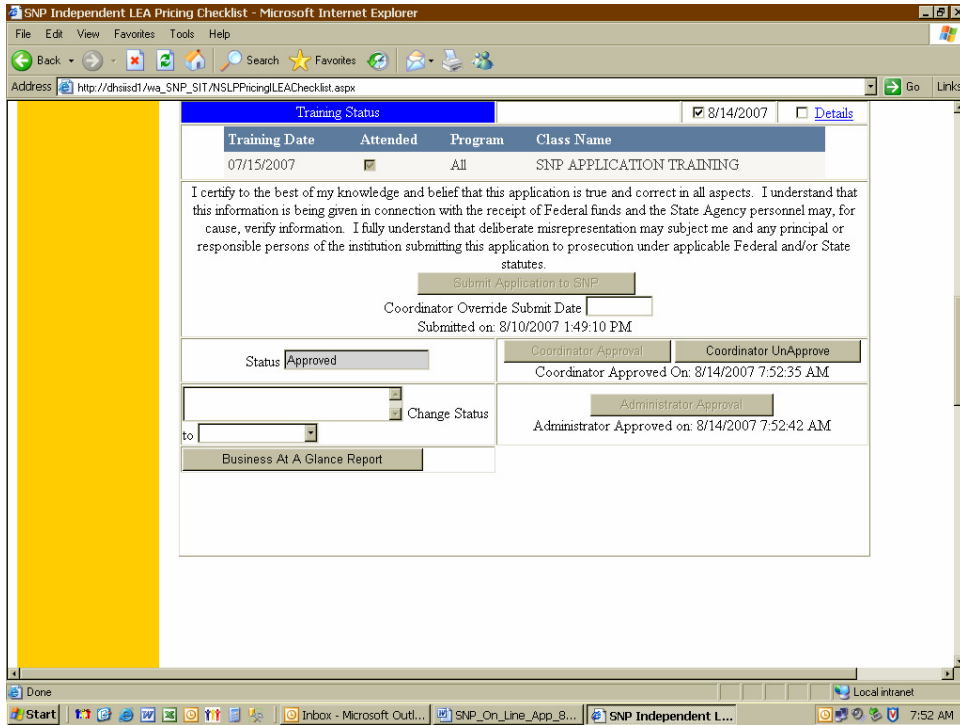
Figure 11.1-3 – Example Coordinator Approval and Administrator Approval

12 Business At A Glance Report

1. The business director or user can access to the Business At A Glance Report. This report displays the Sponsor and Site demographics, based upon the specifications for each program.

2. The Business At A Glance Report is accessed from the user's application checklist.
   a. Select the Business At A Glance button to access the report. (see *Figure 12.1-1*)
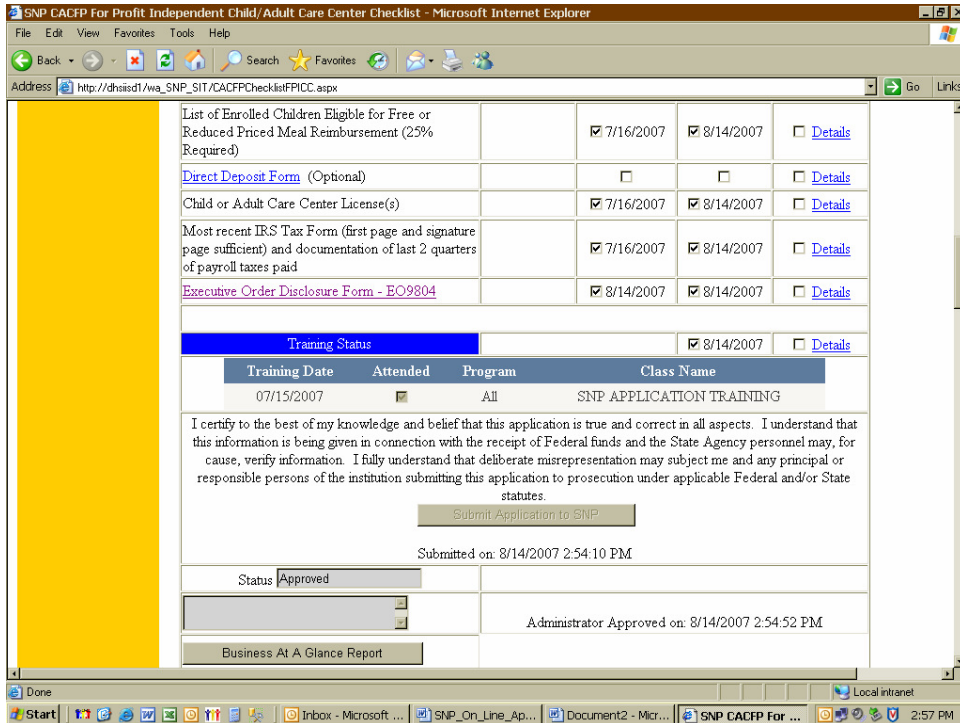
Figure 12.1-1 – View of Business At A Glance Report button

b. The Business At A Glance report viewer will display. In the Select a Format drop down list, select Acrobat (PDF) File. (see *Figure 12.1-2*)

Note: Do not use the Excel export format. It is not a supported function.
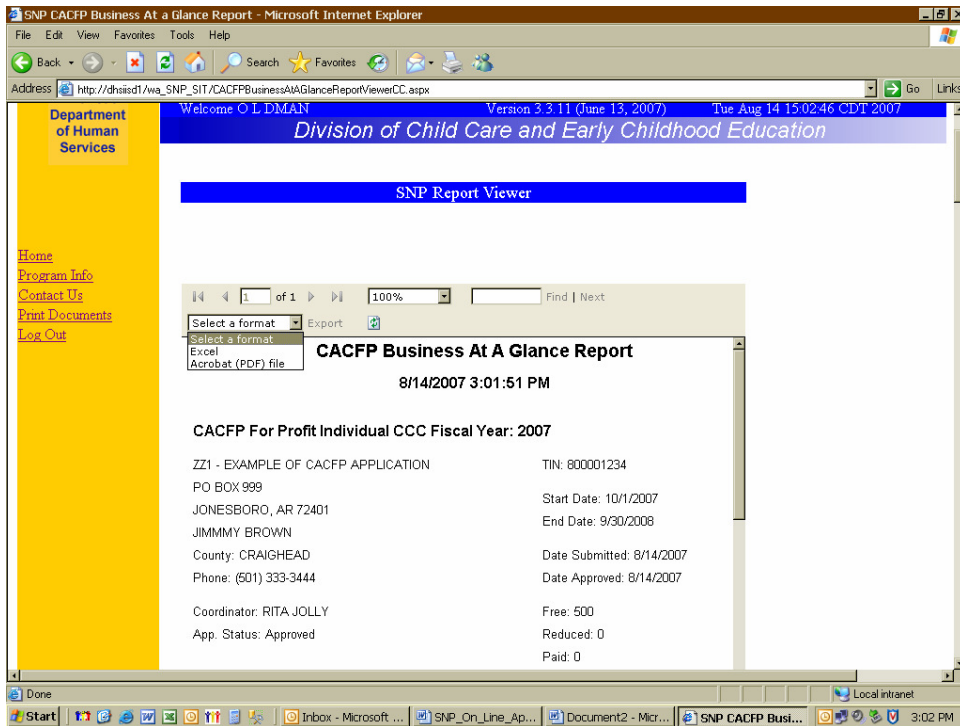
Figure 12.1-2 – View of Business At A Glance Report Viewer

3. After choosing the Acrobat PDF File format, select the ***Export*** hyperlink to initiate a printable version of the form.

   a. A file download box will display. Select the Open button to access the report.

4. Once downloaded, the report will display and allow for the user to view or print the report. (see *Figure 12.1-3*)
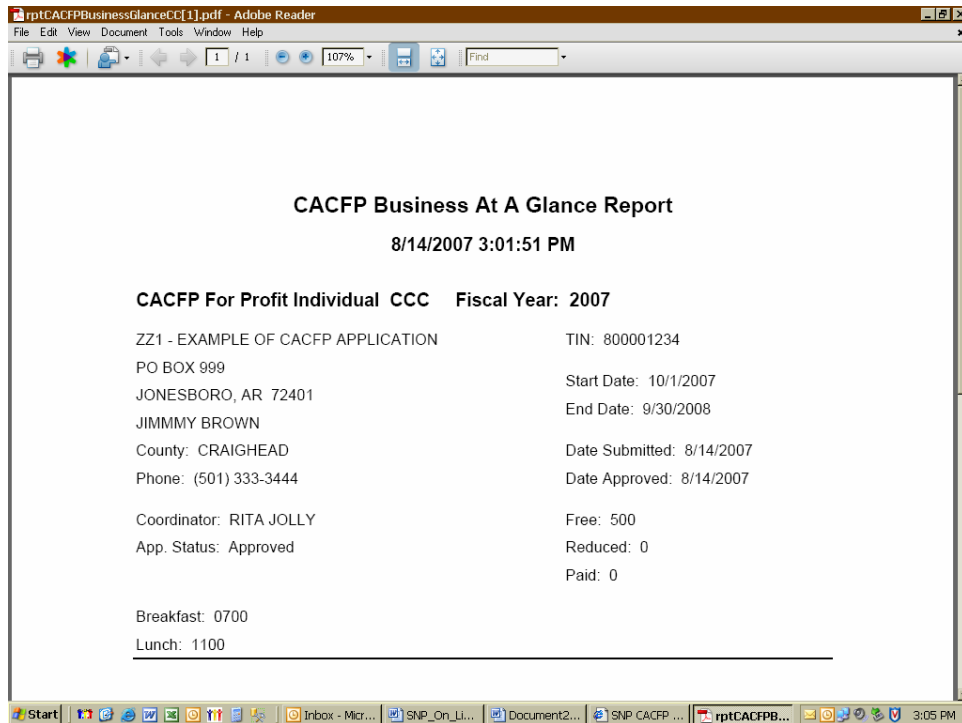
Figure 12.1-3 – Business At A Glance Report (.PDF)

13 Rates/Poverty Levels

13.1 Reimbursement Rates

Select the ***Rates/Poverty Levels*** hyperlink on the main menu to access the Poverty Levels and Reimbursement Rates form. (see *Figure 13.1-1)*

Note: This hyperlink is only available when the user is not logged on to the system.
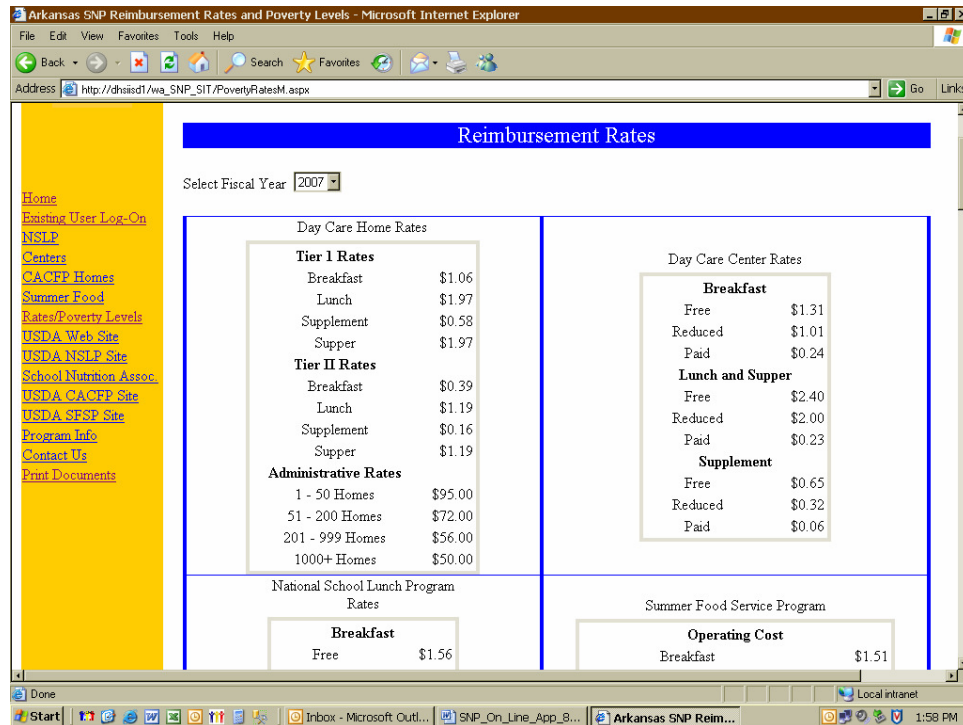
Figure 13.1-1 – Rates and Poverty Levels

1. The Arkansas SNP Reimbursement Rates and Poverty Level form displays a table of the Day Care Home, Day Care Center, National School Lunch Program and the Summer Food Service Program rates by Fiscal Year.
   a. Select the Fiscal Year drop-down list to retrieve rates for other years. The current fiscal year will be the default year.

2. The Arkansas SNP Reimbursement Rates and Poverty Level form displays the Poverty Level amounts for Free and Reduced Meals by Annual, Monthly and Weekly income by Fiscal Year.
   i. Select the Fiscal Year drop-down list to retrieve rates for other years. The current fiscal year will be the default year.

14 USDA Website

This hyperlink, found on the main menu, located on the left side of the form, directs the user to the Regulations and Policy section of the USDA website. This hyperlink is only available when the user is not logged on to the system.

1. Select the *USDA Web Site* hyperlink.
   a. This hyperlink opens the Regulations & Policy form and displays the policy sources for the Food and Nutrition Services (FNS) programs.

15 USDA NSLP Site

This hyperlink, found on the main menu, located on the left side of the form, directs the users to the National School Lunch Program section of the USDA website. This hyperlink is only available when the user is not logged on to the system.

1. Select the *USDA NSLP Site* hyperlink.
   a. The hyperlink opens the USDA National School Lunch Program form and displays a general overview of the program at the national level.

16 School Nutrition Association

This hyperlink, found on the main menu, located on the left side of the form, leads the user to the School Nutrition Association's Local School Wellness Policies. This hyperlink is only available when the user is not logged on to the system.

1. Select the ***School Nutrition Assoc.*** hyperlink.
   a. This hyperlink opens the School Nutrition Program: Local School Wellness Policies form and displays a general overview of the program.

17 USDA CACFP Site

This hyperlink, found on the main menu, located on the left side of the form, directs the users to the Child and Adult Care Food Program section of the USDA website. This hyperlink is only available when the user is not logged on to the system.

1. Select the *USDA CACFP Site* hyperlink.
   a. The hyperlink opens the USDA Child and Adult Care Food Program form and displays a general overview of the program at the national level.

18 USDA SFSP Site

This hyperlink, found on the main menu, located at the left side of the form, directs the users to the Summer Food Service Program section of the USDA website. This hyperlink is only available when the user is not logged on to the system.

1. Select the *USDA SFSP Site* hyperlink.
    a. The hyperlink opens the USDA Summer Food Service Program form and displays a general overview of the program at the national level.

19 Program Info and Contact Us Hyperlinks

19.1 U.S. Department of Agriculture (USDA) Special Nutrition Program

These hyperlinks, found on the main menu, located at the left side of the form, direct the users to the Special Nutrition Program page found within the DHS Gold website. This page is a Welcome Page that includes hyperlinks for additional information and services that SNP offers.

The page offers seven (7) hyperlinks and the SNP Program's DHS Central Office address. To access:

1. Select the *Child and Adult Food Program (CACFP)* hyperlink.
    a. This hyperlink directs the user to an overview of the CACFP program.

2. Select the *National School Lunch Program (NSLP)* hyperlink.
    a. This hyperlink directs the user to an overview of the NSLP program.

3. Select the *Special Milk Program (SMP)* hyperlink.
    a. This hyperlink directs the user to an overview of the SMP program.

4. Select the *Summer Food Services Program (SFSP)* hyperlink.
    a. This hyperlink directs the user to an overview of the SFSP program.

5. Select the *FAQ's* hyperlink.
    a. This hyperlink directs the user to the frequently asked questions for each SNP Program.

6. Select the *Reimbursement Rates* hyperlink.
    a. This hyperlink directs the user to the Reimbursement Rates of the Meals for each program.

7. Select the *USDA Child Nutrition Program Income Guidelines* hyperlink.
    a. The hyperlink directs the user to the income guidelines set forth by the US Department of Agriculture

19.2 Child and Adult Care Food Program (CACFP) Link

The *CACFP* hyperlink allows the user to view information regarding the Child and Adult Care Food Program (CACFP). It includes details regarding the various programs that CACFP offers and includes a hyperlink to the sponsoring organizations for the State of Arkansas.

19.3 National School Lunch Program (NSLP) Link

The *NSLP* hyperlink allows the user to view the minimum requirements to be eligible for the National School Lunch Program (NSLP).

19.4 Special Milk Program (SMP) Link

The *Special Milk Program* hyperlink displays a table of the reimbursement rates for the Meal and Milk Payments to the Arkansas School Food Authorities.

19.5 Summer Food Service Program (SFSP) Link

The *Summer Food Service Program* hyperlink allows the user to view information regarding the Summer Food Service Program (SFSP). It includes the minimum requirements needed to be eligible for SFSP and a hyperlink to the Summer Food Service Program Applications.

19.6 FAQ's Link

The *FAQ's* hyperlink allows the user to view the frequently asked questions about the Special Nutrition Programs.

19.7 Reimbursement Rates Link

The *Reimbursement Rates* hyperlink allows the user to view the payments for meals served in the CACFP Centers and Day Care Homes as of fiscal year 2003-2004.

19.8 USDA Child Nutrition Program Income Guidelines Link

The *USDA Child Nutrition Program Income Guidelines* hyperlink allows the user to view the income guidelines for Free and Reduced Meals, set forth by the US Department of Agriculture.

20 Appendices

20.1   Appendix A - Glossary

Active – Security status in which the user is allowed system access (based upon their security level). The security level will dictate the amount of security the user will have access to within the system. (See Appendix C for the access levels based on the user's specific security level)

Adult Day Care Center – Non-residential day care centers that care for adults aged 60 years of age or older or functionally impaired persons.

Agreement Number – A sequence of characters that contain a prefix and a number, in which the prefix identifies the program that the business is associated. The Agreement Number is a unique number identifier.

Alert – A message that informs the Business Director, Business User or DCC Staff member of an action taken within the web application on a Business.

Application Checklist – The Application Checklist is an integral part of the process of completing, submitting and processing New applications and Reapplications for SNP Business Entities. It is used by the person entering the application to track completion of each form required for the Program Application.

Approved – Refers to the status of an application in which the user has submitted the application to the Assigned Coordinator and the coordinator endorses a contract between the SNP Unit and the Business.

Certificate of Authority – The formal document that authorizes a user to manage applications for a particular Business / Agreement Number.

CCL Number – The unique case number designated by the Child Care Licensing Unit for a day care facility or home. Also called a *Facility Number* or *License Number.*

Closed – Refers to the status of the application in which the Coordinator has ended the contract between the SNP Unit and the Business.

Contact Person – This person is designated to act on behalf of the business or a specific site. This person may or may not be the Authorized Representative.

Contract Year – The specific year for the program application. The NSLP contract year is July 1 through June 30 each year. The SFSP contract year is January 1 through December 31 each year. The CACFP contract year is October 1 through September 30 each year.

Cookies – A collection of information, usually including a User Name and the current date and time, stored on the local computer of a person using the World Wide Web, used chiefly by websites to identify users who have previously registered or visited the site.

Coordinator – The case manager that is assigned to a specific business.

Denied – Refers to the status of an application in which the user has submitted the application but the Coordinator determines that the Business does not meet the eligibility requirements to allow an active contract between the two parties.

Entity Type – The program type the business is operating as.

Exclusion – To remove from participation, consideration, or inclusion. This refers to the business being disbarred, terminated or suspended from being a participant by any unit of the federal government or any unit of a state government.

Executive Director / Responsible Person – Director of the Business or the Person responsible for all correspondence between the Special Nutrition Program and the Business.

Facility Number – The unique case number designated by the Child Care Licensing Unit for a day care facility or home. Also called a *License Number* or *CCL Number.*

Head Start Centers – Refers to a childcare facility that is run by Head Start grants provided by the federal government.

Home Based Center – Refers to a childcare facility that is owned by individuals or groups of individuals that are providing licensed or registered childcare in a home type setting.

Hyperlink– A computer instruction that connects one part of a program or an element on a list to another program or list. Also called a *Hyperlink.*

Inactive – Security status in which the user is not allowed system access.

Interface - A program designed to communicate information from one system of computing devices or programs to another.

License Number – The unique case number designated by the Child Care Licensing Unit for a day care facility or home. Also called a *Facility Number* or *CCL Number.*

Hyperlink– A computer instruction that connects one part of a program or an element on a list to another program or list. Also called a *Hyperlink.*

Mailing Address – The Mailing address is the address that the provider will receive any notification mailed by the licensing division or staff. This address may differ from the Site address and Owner Address.

Non-Pricing – An institution in which there is no separate identifiable charge made for meals served to participants.

Owner Address – The Owner Address is the Owner's personal address. This address may differ from the Mailing and Site address.

Password – An arbitrary string of characters chosen by a user or system administrator and used to authenticate the user when he attempts to log on, in order to prevent unauthorized access to his account.

Pending Approval – Refers to the status of an application in which the user has finished all of the forms and other criteria for their Application Checklist and has submitted the application to the Assigned Coordinator for processing.

Pending Submission – Refers to the status of an application in which the user has started one or more forms or other criteria within their Application Checklist, but has not submitted the application to the Assigned Coordinator. This is the default status of an application until further action has been made by the user.

Pricing – An institution in which a separate identifiable charge is made for meals served to participants.

Private For Profit – Refers to a childcare center that is a sole proprietorship or joint ownership. This facility could also be incorporated.

Private Non-Profit – Refers to a childcare facility that is owned by a group of individuals that have been incorporated. This is recognized by the Secretary of State and 501(c) (3).

Program Administrator – The administrator of the Special Nutrition Program.

Program Coordinator – The lead coordinator for a specific SNP Program, i.e., Summer Food Service Program (SFSP).

Pseudo # – A sequence of characters generated by the computer for new businesses until the SNP Staff have manually changes the number into a Business Agreement Number. The Pseudo # consists of a prefix (ZZ) and a number and is a unique identifier.

Public Non-Profit – Refers to a childcare facility that is operated by the city, county, state, and monies funded through taxes or bonds. Examples include YMCA's, city recreational centers, and Boys and Girls Clubs.

SAP ID – The AASIS Vendor Number used for billing identification.

School Based – Refers to the School Based provider that is owned by the Department of Education, which included public schools and co-ops.

Site – Facility that a Business owns or sponsors. The site is associated to the Business by the Business's TIN Number.

Site Address – The site address is the physical location of the childcare facility. This address may differ from the Mailing and Owner addresses.

Sponsor – One who assumes responsibility for another person or group.

Submit – The mechanism in which the user notifies the assigned coordinator that the Application has been completed and for processing.

TIN – A tax identification number is a number assigned by the State in which a business or entity is operated that identifies it for filing and paying taxes related to the business or entity. Also known as a *Tax Identification Number*.

Terminated - Refers to the status of the contract between the Business and the Special Nutrition Program in which the Business had an active contract with one or more programs and because they failed to perform in accordance with the requirements of their contract, the Coordinator rescinded the agreement.

URL – An abbreviation for Universal Resource Locator, a title that refers to the formal address of a form on the Internet.

User ID – A sequence of characters, different from a password, that is used as identification and is required when logging on to a multi-user computer system, LAN, bulletin board system, or online service. Also called *User Name* or *User Identifier*.

Web Application – The collaboration of Web browser forms used to access programs within the Special Nutrition Program; designed to allow users to create and maintain applications, reports, notices, etc.

Withdrawn - Refers to the status of an application in which the Business had initiated an application but chose not to continue and requested the Coordinator to remove the application from consideration to participate in the program in which they were applying.

20.2   Appendix B – Acronyms

AASIS	Arkansas Administrative System Information System
CCC	Child Care Center
CACFP	Child and Adult Care Food Program
CCFH	Child Care Family Home
CCL	Child Care Licensing
CCLS	Childcare Licensing Specialist
CLEAN	Childcare Licensing Eligibility and Nutrition
DHS	Department of Human Services
NSLP	National School Lunch Program
SFSP	Summer Food Services Program
SMP	Special Milk Program
SNP	Special Nutrition Program
SRS	SQL Reporting Services
SSN	Social Security Number
TIN	Tax Identification Number
URL	Universal Resource Locator

20.3 Appendix C – Access Keys

Access keys, also known as hot keys, allows the user to be able to quickly move about the web form using a combination of ALT or CTRL keys and an alpha, numeric, or special character. Below is a list of the hot keys for the Online Application by page. All of the hot keys noted will use the ALT key in conjunction with the access key. For example, ATL S is used to "Save" the data on many of the forms.

SNP On-Line Access Keys by Web Page		
Page	**Control**	**Access Key**
ApplicationMainM.aspx	Add New/Renewal Application	A
	Applications data grid	P
CACFPAdminBudgetM.aspx	Save Administrative labor	A
	Save Estimated Operational Costs	O
	Save Sources of Income	I
	Submit Completed Administrative Budget	S
	Print Form	P
CACFPScreeningM.aspx	Add Name	N
	Submit	S
	Print Form	P
CenterInfoM.aspx	Apply to participate in the Special Nutrition Program On-Line!	A
ComplianceReview2M.aspx	Save	S
	Submit Form	U
ComplianceReviewM.aspx	Save	S
	Next page	N
	Print Form	P
	Copy previous years Data	C
EditFacilityM.aspx	Applications	A
	Site Maintenance	M
	Manage Users	U
	Generate Site Alert	G
	View Screening	V
	Get License Data	L
	Same as Mailing Address	C
	Same as Mailing Address(2)	Q
	Same as Physical Address	P
	Assignment History	H
	Save	S
EditSubrecipient2M.aspx	Get CCL Data	L
	Save	S
	Return to Site Maintenance	R
EditSubrecipientM.aspx	Return to Facility	R
	Search	S
	Add New	A
	Sub-recipients data grid	D
	Sub-recipient search data grid	G

FRMealPolicyM.aspx	I Have Read and Agree With This Statement	A
	Print Form	P
FundsReceivedM.aspx	Submit Form	S
	Print Form	P
InitialPersonM.aspx	Same as Mailing Address	C
	Same as Mailing Address(2)	Q
	Same as Physical Address	P
	Submit Request for Access to the SNP System	S
InitialScreeningM.aspx	Next	N
InitialScreeningNSLP.aspx	Same as Mailing Address	C
	Same as Mailing Address(2)	Q
	Same as Physical Address	P
	Submit Request for Access to the SNP System	S
InitialScreeningSFSP.aspx	Same as Mailing Address	C
	Same as Mailing Address(2)	Q
	Same as Physical Address	P
	Submit Request for Access to the SNP System	S
NSLP2134B.aspx	Submit Form	S
	Copy previous years Data	C
	Print Form	P
NSLP2134I.aspx	Submit Form	S
	Copy previous years Data	C
	Print Form	P
	Add Breakfast	B
	Add Lunch	L
	Meals data grid	D
NSLP2134S.aspx	Submit Form	S
	Copy previous years Data	C
	Print Form	P
	Add Breakfast	B
	Add Lunch	L
	SNP Approve	A
	Return to Site Listing	R
	Meals data grid	D
	SNP Un-approve	U
NSLP2136.aspx	Next	N
NSLP21362.aspx	I Have Read and Agree to the Terms and Conditions of This Agreement	A
	Print Form	P
NSLP2137.aspx	Add Person	A
	Submit Form	S
	Print Form	P
	People data grid	D
NSLP2152.aspx	Add Person	A
	I Have Read and Agree To the Terms and Conditions in This Document	S
	Print Form	P

	People data grid	D
NSLPInfoM.aspx	Apply to participate in the Special Nutrition Program On-Line!	A
NSLPNonPricingBILEAChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
NSLPNonPricingILEAChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
NSLPPricingBLEAChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
NSLPPricingILEAChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
NSLPSnackAgreement.aspx	I Have Read and Agree To the Terms and Conditions in This Document	S
	Print Form	P
OfficerandEmployeeM.aspx	Save Board Member	B
	Add New Board Member	M
	Save Employee	E
	Add New Employee/Owner	O
	Submit Completed Form	S
	Print Form	P
	Copy previous years Data	C
	Officers data grid	D

	Board Members data grid	Q
	Employees data grid	D
PublicReleaseVerificationM.aspx	Save Release	R
	Clear Fields	C
	Print Form	P
	Submit Form	S
	Public Release data grid	D
SFSP21601.aspx	Print Form	P
	Save	S
	Copy Previous Year	C
	Next Page	N
SFSP21602.aspx	Calculate	C
	Save Personnel Expenses	E
	Calculate(2)	A
	Save Budget	B
	Submit Form	S
SFSP21611.aspx	Print Form	P
	Save and Continue	S
	Next Page Without Saving	N
	Copy Previous Year	C
SFSP21612.aspx	Save and Continue	S
	Next Page Without Saving	N
SFPS21613.aspx	Submit Form	S
	SNP Approve	A
	SNP Un-approve	U
SFSPAgreement.aspx	Submit Form	S
	Print Form	P
SFSPGovtChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SFSPLEAChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SFSPOtherChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C

	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SFSPSummerCampChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SFSPUniversityChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SiteAlertsM.aspx	Save	S
SiteUserAlertM.aspx	Save	S
SiteWelcomeM.aspx	View New/Open	O
	View New	N
	View Closed	C
SNPWelcomeM.aspx	OK	O
	Change Password	C
	Cancel	Q
	Lost Password	L
	Submit	S
ViewScreeningCACFP	Return to Business data	R
WelcomeSNPM.aspx	Apply to participate in the Special Nutrition Program On-Line!	A
	Print Blank Application Forms	P
PrintDocuments.aspx	SFSP Application Packet	S
	W9	W
	Certificate of Authority	A
	NSLP Application Packet	N
	CACFP Application Packet	C
	Direct Deposit Form	D
	Executive Order Disclosure Form	E
	Public Release Form	P
	Discrimination Complaint From	F
	Free and Reduced Price Meal Application for Centers and Homes	M
	CACFP Food Service Contract	O
	SFSP Food Service Contract	R
	Child and Adult Food Program	L

	Letter to Parents	
	Child Care Food Program Enrollment Form	H
	Adult Participant Income Eligibility Application	I
	Addendum to NSLP Food Service Contract	U
	NSLP LEA Joint Agreement	J
	NSLP Food Service Contract	V
	NSLP Meal Count Procedures	Q
	NSLP Sample Meal Count Form	Z
SFSPSiteApplications.aspx	Site Applications data grid	D
NSLPSiteApplications.aspx	Site Applications data grid	D
SFLLL.aspx	Save	S
	Print Form	P
	Submit Form	U
CACFPSNP5.aspx	Add Meal	A
	Add Staff	D
	Save	S
	Submit	U
	Print	P
	Previous Year	Y
	SNP Approve	N
	SNP Un-approve	V
	Return to Site listing	R
	Meals data grid	M
	Staff data grid	T
CACFPCASA1.aspx	Next Page	N
	Print Form	P
CACFPCASA12.aspx	Next Page	N
	Print Form	P
CACFPCASA13.aspx	I Understand and Accept the Terms of this Agreement	S
	Print Form	P
CACFPAdultScreening.aspx	Submit	S
	Print Form	P
CACFPFDCH1.aspx	Submit	S
	Print Form	P
	Return to Site Listing	R
	SNP Approve	A
	SNP Un-approve	U
CACFPFDCH2.aspx	Save	S
	Submit	B
	Print Form	P
	SNP Approve	A
	SNP Un-approve	U
	Return to Site Listing	R
	Add Meal	D
CACFPCFS2113.aspx	Save and Continue	S
	Next Page	N
	Print Form	P

CACFPCFS21132.aspx	Add Monitor Item	M
	Add General Item	G
	Save and Continue	S
	Return to Page 1	R
	Next page	N
CACFPCFS21133.aspx	Save	S
	Submit	U
	Print Form	P
CACFPChecklistFPICC.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
CACFPNPSChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
CACFPHomeChecklist.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
CACFPNPICCM.aspx	Update	U
	Save	S
	Send Alert	A
	Email	E
	Submit Application to SNP	B
	Coordinator Approval	C
	Coordinator UnApproval	O
	Administrator Approval	D
	Business At A Glance Report	R
SNP8.pdf - within PublicReleaseVerificationM.aspx	Close	X
CertificateofAuthority.pdf - from checklists	Close	X
FoodServiceContract.pdf - from checklists	Close	X
FederalW9.pdf - from checklists	Close	X
DIRECTDEPOSITFORM.pdf - from checklists	Close	X
EO9804.pdf - from checklists	Close	X

20.4   Appendix D – Security Level (CRUD)
"**C**reate, **R**ead, **U**pdate, **D**elete"

	SNP Program Administrator	CACFP Program Coordinator	NSLP Program Coordinator	SFSP Program Coordinator	Grants Coordinator	Financial Coordinator	Executive Director / Responsible Party	Business	No Security Access
APPLICATION									
SNP Introductory Page	R	R	R	R	R	R	R	R	R
SNP Initial Screening	NA	NA	NA	NA	NA	NA	C, R		C
View Screening	R	R	R	R	R	R	C, R	C,CR	
SNP Business Maintenance	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
SNP Application Maintenance	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
SNP Site Maintenance	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
SNP Business Assignments	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	R	R	
SNP Application Log-On; Business Search / Display; Application Search / Display	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	R	R	
Business Welcome Form; Business List							C,R,U	C,R,U	
SNP Application Maintenance	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			
Checklist	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
Electronic Signature	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
Checklists	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	
Program Administrator Approval	C,R,U	R	R	R	R	R			
Application Status	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	R	R	
Site Status	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			
Create Alert	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			
SNP View / Update Alerts	R,U	R,U	R,U	R,U	R,U	R,U	R,U	R,U	
Create E-mail	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			
SNP Program Inquiry	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			
SNP Exclusion Detail	R	R	R	R	R	R			
SNP Training	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	R	R	
Populate SNP Training Notice	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U			

Maintain Welcome Messages	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U		
SNP SECURITY MAINTENANCE	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U		
CHECKLIST FORMS								
(AQ-1) Application Questionnaire	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-3) Officers and Employees	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-4) Funds Received	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(CAAB-1) Administrative Budget	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(FRPS-1) Meal Policy Statement	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-5A) Application for Participation / Business	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-5B) Application for Participation / Site	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-6) Pre-Award Compliance	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(CASA-1) Agreement	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-7) Public Release Verification	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(APQ-1) Adult Program Questionnaire (if applicable)	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(APPR-1) AR Participation Requirements	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(SNP-2) Certificate of Authority	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(W-9) Taxpayer ID Number	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(# ??) After School Snack Agreement	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(CFS-2113) Application for Participation and Budget/ Management Plan	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(FDCH-1) Provider Agreement	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U

(FDCH-2) Application for Participation / Homes	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(NSL-2137) Pricing – Policy Statement for Free and Reduced Price Milk Programs	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
(NSL-2152) Non Pricing – Policy Statement	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U	C,R,U
Reports								
SNP Alerts	R	R	R	R	R	R		
SNP E-mails	C, R	C, R	C, R	C, R	C, R	C, R		
SNP Training Requirements Not Met	R	R	R	R	R	R		
SNP Program Training Report	R	R	R	R	R	R		
Closed Business Report	R	R	R	R	R	R		
Site Summary	R	R	R	R	R	R	R	R
CACFP License Expire Summary	R	R	R	R	R	R		
Paper Applicants	C,R	C,R	C,R	C,R	C,R	C,R		
Business Applicants	C,R	C,R	C,R	C,R	C,R	C,R	C,R	C,R
Application Packets	C,R	C,R	C,R	C,R	C,R	C,R	C,R	C,R
Application Initiated / Non-Activity Report	R	R	R	R	R	R		
Program Data sheet	R	R	R	R	R	R		
Business at a Glance	C,R	C,R	C,R	C,R	C,R	C,R	C,R	C,R
Mailing Labels	C,R	C,R	C,R	C,R	C,R	C,R		
Out reach / Program Inquiry	C,R	C,R	C,R	C,R	C,R	C,R		
Monthly Report	R	R	R	R	R	R		
Application	R	R	R	R	R	R	R	R
(AQ-1) Application Questionnaire	R	R	R	R	R	R	R	R
(SNP-3) Officers and Employees	R	R	R	R	R	R	R	R
(SNP-4) Funds Received	R	R	R	R	R	R	R	R
(CAAB-1) Administrative Budget	R	R	R	R	R	R	R	R
(FRPS-1) Meal Policy Statement	R	R	R	R	R	R	R	R

(SNP-5A) Application for Participation / Business	R	R	R	R	R	R	R	R
(SNP-5B) Application for Participation / Site	R	R	R	R	R	R	R	R
(SNP-6) Pre-Award Compliance	R	R	R	R	R	R	R	R
(CASA-1) Agreement	R	R	R	R	R	R	R	R
(SNP-7) Public Release Verification	R	R	R	R	R	R	R	R
(APQ-1) Adult Program Questionnaire (if applicable)	R	R	R	R	R	R	R	R
(APPR-1) AR Participation Requirements	R	R	R	R	R	R	R	R
(SNP-2) Certificate of Authority	R	R	R	R	R	R	R	R
(W-9) Taxpayer ID Number	R	R	R	R	R	R	R	R
(# ??) After School Snack Agreement	R	R	R	R	R	R	R	R
(CFS-2113) Application for Participation and Budget/ Management Plan	R	R	R	R	R	R	R	R
(FDCH-1) Provider Agreement	R	R	R	R	R	R	R	R
(FDCH-2) Application for Participation / Homes	R	R	R	R	R	R	R	R
(NSL-2137) Pricing – Policy Statement for Free and Reduced Price Milk Programs	R	R	R	R	R	R	R	R
(NSL-2152) Non Pricing – Policy Statement	R	R	R	R	R	R	R	R
Notices								
Denial Notice	R	R	R	R	R	R		
Renewal Notice	R	R	R	R	R	R		
Approval Notice	R	R	R	R	R	R		
Closure Notice	R	R	R	R	R	R		
Withdrawal Notice	R	R	R	R	R	R		
Termination Notice	R	R	R	R	R	R		

SNP Training Notice	R	R	R	R	R	R		
Attach PDF Files	R	R	R	R	R	R	R	R
By Application Packet	R	R	R	R	R	R	R	R
By Application Form	R	R	R	R	R	R	R	R
Application Directions	R	R	R	R	R	R	R	R
Other forms	R	R	R	R	R	R	R	R