USDA Meal Sponsors Equipment Grant

* Required



This application is open for USDA Meal Sponsors to request equipment that will help sustain and expand the amount of summer and after school meals served to kids and teens in Little Rock. The Be Mighty Little Rock task force will review applications and select organizations to award equipment. Organizations are encouraged to request refrigerators, freezers, stoves, sinks, dishwashers, tables, chairs, Cambro containers, or other equiptment that supports and sustains USDA meal programs in Little Rock. Organizations that would like to be considered should complete the application by March 29th, 2019. This opportunity is only available for sponsors operating meal programs in Little Rock, AR. Please contact the Be Mighty Project Coordinator at 501-918-3016 or kderossette@cals.org for more informaiton. Submit electronic applications here, email PDF applications to kderossette@cals.org, or mail_paper applications to the address below.

Attn: Kay Kay DeRossette (admin) Central Arkansas Library System 100 S. Rock St. Little Rock, AR 72201

Sponsor Information

1. Name of Orgnaization *

2. First Name

3. Last Name

4. Title

5. Phone Number

6. Email Address

7. Address

8.	Citv	

9. Zip Code

10. Please check all that apply

Check all that apply.

My organization is approved to participate in the United States Department of Agriculture's Summer Food Service Program (SFSP)

My organization is approved to participate in the United States Department of Agriculture's Child and Adult Food Care Program (CACFP-At Risk)

My organization is submitting an application to participate in the United State Department of Agriculture's Summer Food Service Program

My organization is submitting an application to participate int he United States Department of Agricluture's Child and Adult Care Food Program (CACFP-At Risk)

11. Please select the choice that best represents your organization. *

Mark only one oval.

- Government Entity
- 501 (c) (3)
- Church
- Other:

Equipment Request and Impact

Be Mighty Little Rock will grant equiptment to organizations that display a need to sustain and expand summer meal programs. Sponsors are incouraged to submit request for equipment in the amount of \$500-\$3,000. Equipment includes but is not limited to refridgerators, freezers, sinks, stoves, ovens, dishwashers, vent hoods, tables, chairs, and food carriers.

2. What type of equipment is needed to sustain and or expand meal services at your site(s)? Please include item(s) name, brand, quantity, cost, and link to purchase online or offline purchasing instructions.
3. What impact will having this equipment provide for your organization in reguards to the
sustainability or expansion of summer and or after school meal programs?
4. Is your organization in good standing with Arkansas Department of Human Services and Arkansas Department of Health?
Check all that apply. Yes, we are in good standing with Arkansas Department of Human Services and the Arkansas Department of Health.
No, we currently have one or more corrective actions in place with either Arkansas Departmer of Human Services or Arkansas Department of Health.
5. Would your organization be intersted in receiving meal tracking software? Mark only one oval.
Yes No Skip to question 18.

Maybe

Meal Tracking Software and Technology

16. If the Arkansas Hunger Releif Alliance supplied your organization with three year access to meal tracking software would you use it?

Mark only one oval.



Mark only o	, we have access to a computer, smart phone, ipad, or tablet at each meal site.
	we would need a computer, smart phone, ipad, or tablet for the sites using the meal
tracking so	
Son	ne of our sites have access to technology but not all of them.
Site Inforr	nation
8. Site Name	
19. Address (s	treet, city, and zip)
20. Check all t	
Check all th	
	s a new site
	ite has participated in SFSP
	ite participates in CACFP
21. Is this an c	open site?
Mark only o	-
O Yes	
O No	
	s will be served at this site?
Check all th	
Break	
Suppe	
Snack	
23. What davs	of the week will meals be served at this site?
Check all th	
Mond	ay
Tueso	lay
	esday

Thursday

Friday

Saturday

Sunday

- 24. Enter the start and end dates for your summer meal program at this site.
- 25. Will your organization be sponsoring additional sites? *

Mark only one oval.

Yes No

Stop filling out this form.

Site Information

27. Address

28. Check all that apply

Check all that apply.

This is a new site



This site participates in CACFP

29. Is this an open site?

Mark only one oval.

\subset	\supset	Yes
($\overline{)}$	No

30. What meals will be served at this site?

Check all that apply.

Breakfast
Lunch
Supper

Snack

31. What days of the week will meals be served at this site?

Check all that apply.

Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday

32. Enter the start and end dates for your summer meal program at this site.

33. Will your organization be sponsoring additional sites? *

Mark only one oval.



Stop filling out this form.

Stop filling out this form.

Site Information

34. Site Name

35. Address

36. Check all that apply

Check all that apply.

This site has participated in SFSP

37. Is this an open site?

Mark only one oval.

\subset	\supset	Yes
(\supset	No

38. What meals will be served at this site?

Check all that apply.

Breakfast
Lunch
Supper
Snack

39. What days of the week will meals be served at this site?

Check all that apply.

Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday

40. Enter the start and end dates for your summer meal program at this site.

41. Will your organization be sponsoring additional sites? *

Mark only one oval.

Yes No

Stop filling out this form.

Site Information

42. Site Name

43. Address

44. Check all that apply

Check all that apply.

This is a new site

This site has participated in SFSP

This site participates in CACFP

45. Is this an open site?

Mark only one oval.

\subset	\supset	Yes
\subset	\supset	No

46. What meals will be served at this site?

Check all that apply.

Breakfast
Lunch
Supper
Snack

47. What days of the week will meals be served at this site?

Check all that apply.

Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday

- 48. Enter the start and end dates for your summer meal program at this site.
- 49. Will your organization be sponsoring additional sites? *

Mark only one oval.



Stop filling out this form.

Site Information

50. Site Name

51. Address

52. Check all that apply

Check all that apply.

	This is a new site
	This site has participated in SFSP
	This site participates in CACFP
	Is this an open site? Mark only one oval. Yes No What meals will be served at this site? Check all that apply.
	Breakfast
	Lunch
	Supper
	Snack
55.	What days of the week will meals be served at this site? Check all that apply.
	Monday
	Tuesday
	Wednesday
	Thursday
	Friday
	Saturday
	Sunday
56.	Enter the start and end dates for your summer meal program at this site.
57.	Will your organization be sponsoring additional sites? * Mark only one oval.

Stop filling out this form.

Site Information

No

58. Site Name

60. Check all that apply

Check all that apply.

This is a new site
This site has parti
This site partising

his site has participated in SFSP

This site participates in CACFP

61. Is this an open site?

Mark only one oval.

\subset	\supset	Yes
(\supset	No

62. What meals will be served at this site?

Check all that apply.

Breakfast
Lunch
Supper
Snack

63. What days of the week will meals be served at this site?

Check all that apply.

Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday

64. Enter the start and end dates for your summer meal program at this site.

65. Will your organization be sponsoring additional sites? *

Mark only one oval.

C	\supset	Yes
($\overline{)}$	No

Stop filling out this form.

Site Information