



P.O. Box 1437, Slot S140 · Little Rock, AR 72203-1437
 501-682-8590 · Fax: 501-683-6060 · TDD: 501-682-1550

GENERAL INFORMATION

Name of School Food Authority (SFA)	Date <i>Mo/Day/Yr</i>	Agreement Number
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- | | Yes | No | NA |
|---|--------------------------|--------------------------|--------------------------|
| 1. Does the public release about the NSLP (National School Lunch Program) include: | | | |
| a. the required nondiscrimination statement? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. complaint filing information? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has the public release about the NSLP been sent to news media and community/grassroots organizations?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has a procedure for handling discrimination complaints/grievances been established? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have any complaints of discrimination (written or verbal) been received in the past three years? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>If Yes, indicate the disposition of each case (attach sheet).</i> | | | |
| 5. Is the nondiscrimination and "And Justice for All" poster displayed in a prominent place, visible to and readable by recipients, near the serving area? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is there a need for program materials to be printed in a language other than English?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>If Yes, has this been done?</i> | | | |
| 7. Complete Racial/Ethnic Data Chart below. Racial/Ethnic data is collected on the free/reduced price meal application. If the parent does not voluntarily fill in this information, a school official may fill in the data based on observation. | | | |

Aggregated Totals	All fields below must have a number. Enter a zero "0" if there is no data.			
Report Total Student Population by Identified Categories Listed (unduplicated count)	Total District Enrollment	No. Approved for Free/Reduced Price Meals	Number Denied	Number of Food Service Staff
Hispanic/Latino <i>of any race</i>				
American Indian/Alaska Native				
Asian				
Black/African American				
Native Hawaiian or Pacific Islander				
White				
Two or More Races				
TOTAL	0	0	0	0

- | | Yes | No | NA |
|--|--------------------------|--------------------------|--------------------------|
| 8. Based on your student population, are denied free/reduced price meal applicants (column c) disproportionately composed of minority applicants? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do procedures ensure that civil rights racial/ethnic data is made available only to authorized personnel? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Does the school agency employ 15 or more persons? (total staff of agency) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. <i>If Yes, has agency designated a staff person to coordinate Title IX (sex nondiscrimination) and gender equitable schools compliance?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. <i>If Yes, has agency designated a staff person to coordinate Section 504 (disability) compliance?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is a prescription from a medical practitioner on file for each individual with a disability requiring special dietary needs? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is civil rights training offered annually for Child Nutrition Program "frontline staff" and supervisors? "Frontline staff" includes all staff who administer and interact with Child Nutrition Program (CNP) recipients..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

For nonpublic school agency only

13. Does the school/institution limit or deny admission on the basis of race, color, sex, age, disability, or national origin?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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SIGNATURE

Signature of Official	Date Signed <i>Mo./Day/Yr.</i>
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