

Afterschool Snack Program (ASP)

SCHOOL ELIGIBILITY CHECKLIST

This self-assessment form can be used by school food authorities (SFAs) to determine if a school meets the ASP criteria. SFAs should complete this form prior to submitting an ASP application to the Connecticut State Department of Education (CSDE) for approval. Complete one checklist for each ASP site. For questions regarding the ASP application process, contact Jackie Schipke at jackie.schipke@ct.gov or 860-807-2123.

SFA: _____ Site name: _____

Program start date: _____ Program end date: _____

Time school day ends: _____ Time afterschool care program starts: _____

Required ASP Criteria	Yes	No	If yes, include a description of procedures. If "No", document how the SFA will make corrections to comply with ASP regulations.
Is the afterschool care program sponsored or operated by the local educational agency (LEA)?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the afterschool care program organized, supervised, structured and regularly scheduled?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the afterschool care program include an educational or enrichment component?	<input type="checkbox"/>	<input type="checkbox"/>	Describe educational/enrichment component:
Does the afterschool care program have a reliable, accurate collection procedure for snack counts and claims?	<input type="checkbox"/>	<input type="checkbox"/>	Describe collection procedure:
Does the afterschool care program have an accurate cash management procedure for non-area eligible sites?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the afterschool care program use the appropriate, approved production record and are they complete and up-to-date?	<input type="checkbox"/>	<input type="checkbox"/>	
Are students who participate in the afterschool care program ages 3-18?	<input type="checkbox"/>	<input type="checkbox"/>	List ages/grades participating in afterschool care program:
Have school nutrition personnel been assigned to conduct the required on-site reviews?	<input type="checkbox"/>	<input type="checkbox"/>	

ASP SCHOOL ELIGIBILITY CHECKLIST, continued

Please provide detailed responses to the following for this site.

1. Describe the afterschool care program schedule, e.g., days of the week, hours of operation, etc.

2. How is the afterschool care program organized?

3. Who supervises the afterschool care program?

If the site is AREA ELIGIBLE, please provide the information below:

4. Describe the process that was used to determine area eligibility for the ASP.

5. Indicate the percentage of free- and reduced-eligible children as of the most recent October:

_____ % of students eligible for free and reduced meal in October _____
Insert number *Insert year*

ASP SCHOOL ELIGIBILITY CHECKLIST, continued



For more information on the ASP, visit the CSDE's [ASP](#) webpage or contact the [school nutrition programs](#) staff in the CSDE Bureau of Health/Nutrition, Family Services and Adult Education, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103.

This document is available in PDF at www.sde.ct.gov/sde/lib/sde/pdf/deps/nutrition/snack/aspeligcheck.pdf and Word at www.sde.ct.gov/sde/lib/sde/word_docs/deps/nutrition/snack/aspeligcheck.doc.

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

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