

**Connecticut State Department of Education
Summer Food Service Program (SFSP)**

2015 APPLICATION INSTRUCTIONS FOR EXPERIENCED SPONSORS

| REQUIRED FORMS/MATERIALS FOR ALL APPLICATIONS | |
|--|---|
| Form/Material Number/Name | Title/Instruction |
| Sponsor Application | <p>Application for Participation <i>Please read carefully and answer all questions.</i></p> <p>TO BE COMPLETED:</p> <ul style="list-style-type: none"> • One application per sponsor. |
| Site Application | <p>Site Information Document <i>Please read carefully and answer all questions.</i></p> <ul style="list-style-type: none"> • TO BE COMPLETED: One application per site. |
| Budget | <p>Summer Food Service Program Budget</p> <p>TO BE COMPLETED:</p> <ul style="list-style-type: none"> • One budget per sponsor. This section is not mandatory for School Food Authorities that operated SFSP in 2014 or those School Food Authorities transitioning from SSO to SFSP that have undergone Administrative Review in the previous 12 months, however, the CSDE encourages schools to consider the increased liability they may incur as a result of eliminating the budget review process. |
| Staff Training | <p>Sample Training Certification Letter</p> <p>TO BE UPLOADED TO CHECKLIST/SUPPORTING DOCUMENTS:</p> <ul style="list-style-type: none"> • List of training topics to be covered. See Sample Annual Training Session Documentation. • Training Certification Letter. See Sample Training Certification Letter. |
| Monitoring | <p>Sample Visit Certification Letter</p> <p>TO BE UPLOADED TO CHECKLIST/SUPPORTING DOCUMENTS:</p> <ul style="list-style-type: none"> • A letter providing assurance that all new sites have been visited and that they have the capacity and facilities to provide meals for the anticipated number of children (submit prior to the program opening date). See Sample Visit Certification Letter. • The schedule for making pre-operational visits to new sites, visiting new sites during the first week of operation and reviewing all sites during the first four weeks of operation. See Sample Visit/Review Schedule. |
| Meal Pattern | <p>SFSP Meal Pattern</p> <p>TO BE RETURNED:</p> <ul style="list-style-type: none"> • Menus for all meals and snacks to be served. Sponsors using a cycle menu must provide an 11-day cycle. Menus submitted for approval must contain the name of the food item and the quantity of the food item to be served. Any sponsors intending to implement offer versus serve (OVS) must include detailed explanation regarding implementation. Menu approval must be granted prior to the beginning of program operation. |

2015 SFSP APPLICATION INSTRUCTIONS, continued

| ADDITIONAL FORMS/MATERIALS* | |
|--|---|
| Form/Material Number/Name | Title/Instruction |
| Authority Changes | <p>Authorized Signature Change Form and Instructions Required to be submitted whenever one of the two authorized signers changes on the ED-099.</p> <p>TO BE RETURNED:</p> <ul style="list-style-type: none"> • One original (signatures must be original) any time change is being made. See Authorized Signature Change Form and Instructions. |
| Closed Enrolled Sites and Camps | <p>Income Guidelines For use by camp sponsors and sponsors with enrolled program sites. Current guidelines are effective July 1, 2014, through June 30, 2015. DO NOT distribute to parents.</p> <p>A sample copy of the Income Eligibility Application and Parent Letter distributed by camp sponsors and sponsors with enrolled sites. The sample of the Application and Parent Letter is included in Operational Memorandum #02-15 - SFSP.</p> <p>TO BE RETURNED:</p> <ul style="list-style-type: none"> • Documentation showing the number of children enrolled (each camping session for camps) who are eligible for free or reduced priced meals must be provided as soon as it is available but no later than the claim submission. See Sample Enrollment Information Form. |
| Vended Programs | <p>Contract with Food Service Management Company</p> <p>TO BE RETURNED:</p> <ul style="list-style-type: none"> • A synopsis of Invitation to Bid including date and place of publication or the proposed agreement with School Food Authority. See instructions and resources on the CSDE's SFSP Web page. |
| NYSP | <p>Sample National Youth Sports Program (NYSP) Certification Letter</p> <p>TO BE RETURNED:</p> <ul style="list-style-type: none"> • National Youth Sports Program Certification Letter. See Sample NYSP Letter. |
| <p>* Please contact the Summer Meals Coordinator at the Connecticut State Department of Education if you are unsure whether these requirements apply to your organization.</p> | |

2015 SFSP APPLICATION INSTRUCTIONS, continued

| MATERIALS TO BE UPDATED ANNUALLY AND KEPT ON FILE IN SPONSOR RECORDS | |
|--|---|
| Form/Material Number/Name | Title/Instruction |
| Health Department Notification | <p>Sample Health Inspection Letter</p> <p>A copy of the proposed letter to the local health department providing notification of intention to operate food service at the sites listed. Give specific dates and times of operation for each site. See Sample Health Inspection Letter.</p> |
| Public Notification | <p>Sample Press Releases</p> <p>Submit a copy of release(s) which correspond to the type of site(s) operating as submitted to the media. Include the date sent and name(s) of media to which it was sent. See Sample Press Release by site type.</p> |
| Meal Counting | <p>Sample Meal Counting Forms</p> <p>A description of procedures for collecting information on the daily number of meals served to children and the daily number of hours worked by site personnel (if labor costs will be claimed). Include both the frequency of information collection and the method used to collect information from sites. See Sample Meal Counting Forms on the CSDE's SFSP Web page.</p> |
| Civil Rights | <p>Civil Rights Requirement</p> <p>A summary of Civil Rights requirements with appropriate forms and instructions is enclosed. Review Civil Rights packet and complete Civil Rights Beneficiary Data Collection Form. Files must be maintained in sponsor records as outlined in packet.</p> |

2015 SFSP APPLICATION INSTRUCTIONS, continued

| MATERIALS PROVIDED FOR REFERENCE/ASSISTANCE | |
|---|--|
| Form/Material Number/Name | Title/Instruction |
| Appeal Procedures | Sponsor and Food Service Management Company Appeal Procedures Review for your information. |
| Federal Regulations | USDA Regulations Part 225 Review for your information. |
| FNS 796-4 | USDA Financial Management Instructions Review for your information. |

When the electronic application is completed, please make sure that ALL of the required forms and materials are addressed.

This document is available at www.sde.ct.gov/sde/lib/sde/pdf/deps/nutrition/sfsp/cappexpsfsp.pdf.
For more information on the SFSP, visit the Connecticut State Department of Education [SFSP Web site](#).



Connecticut State Department of Education
Bureau of Health/Nutrition, Family Services and Adult Education
25 Industrial Park Road
Middletown, CT 06457

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

Persons with disabilities who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

USDA is an equal opportunity provider and employer.