OSPI Child Nutrition Services Program Checklist
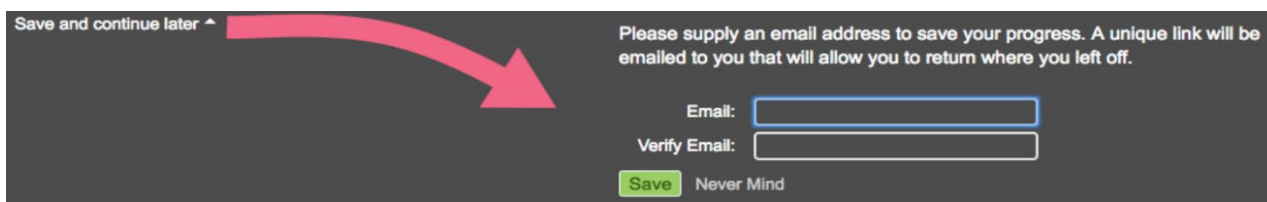
New Sponsor Questionnaire Checklist

This checklist is a guide to completing the New Sponsor Questionnaire – you do not need to return this form to OSPI.

Before You Start

The questions in this survey are program specific. However, all program applicants must answer the Introductory Questions and sponsors not approved to operate another Child Nutrition Program must answer the Civil Rights Pre-Award Questions.

✓ You will want to access links and have materials ready **prior** to starting this survey. Please have the required program documents and answers ready for each program you are applying for.

✓ Using links in the survey will navigate you to a different webpage.
- You can save the progress of your survey by selecting the "Save and continue later" option at the top of your screen.
- A unique link will be emailed to you that will allow you to continue the survey where you left off.

✓ Information entered in an unsaved or unsubmitted survey will be lost.

All New Sponsors

1. **Introductory Questions**
   - ☐ Sponsoring organization contact information
   - ☐ Type of sponsoring organization (Local Education Agency (LEA), For Profit, Non-Profit, Local, etc.)
   - ☐ Is your sponsoring organization currently approved to operate a Child Nutrition Program?
   - ☐ Which Child Nutrition Programs would you like to apply for?

- National School Lunch Program (NSLP)
- School Breakfast Program (SBP)
- NSLP Seamless Summer Option (SSO) - SY 21-22 Waiver
- Child & Adult Care Food Program (CACFP)
- Summer Food Service Program (SFSP)
- Special Milk Program (SMP)

☐ How does your organization plan to prepare meals?
- Onsite self-prep
- Offsite self-prep
- Food Service Management Company (FSMC)
- Vended meals
- N/A for Family Day Care Home (FDCH) Sponsors

☐ If your organization currently has a FSMC or Vendor agreement, does this agreement/contract include meals for the program you are applying for?

2. Civil Right Pre-Award Questions

A civil rights compliance review must occur prior to your Child Nutrition application approval. Civil rights laws and regulations ensure equal access to federally assisted programs regardless of a person's race, color, national origin, age, sex or disability.

Organizations that apply for the opportunity to operate federally assisted programs must demonstrate their ability to comply with such civil rights laws and regulations **prior** to receiving approval to conduct the programs. The questions asked here are required by the United States Department of Agriculture.

☐ Explain the documented efforts your organization has made, or intends to make, to inform minority or grassroots organizations about this USDA program and the opportunity to participate.

☐ How will you assure that underserved populations have an equal opportunity to participate?

☐ Provide examples of how the program will be publicly announced to all potential participants regardless of race, color, national origin, age, sex or disability. Include documentation of current or intended efforts to inform community organizations about the program, including copies of letters, lists of organizations contacted.

☐ Provide the names of other Federal agencies providing assistance to the applicant organization and whether the applicant has ever been found to be in noncompliance by those Federal agencies.

☐ Is the USDA nondiscrimination statement appropriately included in the agency's website and program documents and publications, if the organization already operates other FNS programs? Otherwise, how does the organization plan to

incorporate the nondiscrimination statement into program materials, including websites?

☐ Does the present location of the facility deny potential participants access to benefits on the basis of race, color, national origin, age, sex or disability?

☐ Using the following definitions of ethnicity and race, provide an estimate (in percentages) of the ethnic and racial makeup of the population to be served. This data can be obtained online at http://www.census.gov/quickfacts/table/PST045215/00.

- **Ethnicity**
  - **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic or Latino."

  - **Not Hispanic or Latino.**

- **Race**
  - **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

  - **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

  - **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to 'Black or African American.'

  - **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

  - **White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

☐ Has there ever been a complaint or civil rights lawsuit filed against the organization?
- If Yes, explain the nature of the complaint, how it was resolved and how the proper Federal authorities were notified

☐ Has your sponsoring organization been found out of compliance with civil rights requirements?
- If Yes- Please describe any areas of non-compliance and how it was resolved.

☐ How will your organization provide translated materials as needed to all participants and applicants who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English?

☐ Provide a brief description of any pending applications to other Federal agencies for assistance. Include a description of any Federal assistance being provided at the time of application.

Child and Adult Care Program & Summer Food Service Program

EIN & Non-Profit Verification

☐ For profit organizations
- Upload documentation from the IRS with your EIN number
  - Documentation may include notice of your SS-4 application if you are a new organization that has not yet filed taxes under your new entity, or this could be your 147-C letter.

☐ Non-profit organizations
- Upload proof of 501C3 status determination letter from the IRS confirming tax exempt status

Responsible Principals

Per federal regulations the State Agency must not approve a sponsor to operate CACFP or SFSP if the institution and/or the responsible principals have been placed on the National Disqualified List (NDL) or been previously terminated from a Child Nutrition Program. The responsible individual is defined as the person who bears responsibility for the operation of the program.

☐ Examples of responsible individuals per program type:
- **Nonprofit institution:** Board Chairman, Executive Director
- **Church:** Pastor or Church Board Member with signature authority for the church
- **For-profit institution:** Owner/president
- **LEA:** School food service director, accountant, and the responsible administrator (principal or superintendent).
- **Tribe:** Tribal Chair or Board Member with signature authority
- **College/University:** Dean or another administrator with signature authority
- **Public institution (City/County):** Administrator with signature authority

☐ Sponsors must provide the name and title for those who sign the agreement and who are responsible administrators for the Program. At a minimum, information must be provided for the:
- Signer of the Agreement
- Program Contact
- Claim Contact
- Second Program Contact.

Financial Viability and Administrative Capability & Accountability

Sponsors that contract with OSPI to sponsor a Child Nutrition Program(s) must contractually accept complete responsibility for the Child Nutrition Program approved to operate. The federal CACFP regulations require all participating institutions to demonstrate financial **viability**, maintain adequate administrative **capability**, and have internal controls for **accountability**.

Note, if you are currently approved to operate another Child Nutrition Program you do not need to complete this section

☐ Can you demonstrate financial and administrative capability?

☐ Have you been found deficient in or terminated from a federally funded Child Nutrition Program?

☐ Do you have a business saving/checking account?

☐ Do you currently have resources set aside to operate your business for at least 3 months?

☐ Do you currently have internal controls and procedures in place for financial management?

☐ Do you currently have internal controls and procedures in place to demonstrate accountability?

☐ Do you have current tax records for this business?

☐ Do you have a food service operations budget?

☐ Are you able to demonstrate "need" to provide sponsoring services to homes that are not currently under another CACFP Sponsoring Organization? (Family Day Care Home Sponsors only)

CACFP Operation- CACFP Sponsors only

☐ What is your anticipated start date for CACFP?

☐ Would your organization be interested in having your site(s) under the management of a current CACFP sponsoring organization as unaffiliated site(s) as opposed to your organization becoming a new CACFP sponsor?

☐ Are meals currently being served?

☐ What ages are currently enrolled?

☐ Which component(s) of the Child and Adult Care Program do you plan to operate?
- Child Care
- At-Risk Afterschool
- Outside School Hours
- Adult Care
- Family Day Care Home (FDCH)

CACFP Operation- At-Risk Afterschool Sponsors Only

Sites that operate the At-Risk Afterschool component of the CACFP must be in the attendance area of a public school (elementary, middle, or high school) with at least 50% free and reduced-price eligibility. Please reference the Washington Public School Data for Area Eligibility Report to be sure your site(s) meets this requirement.

☐ For all sites where you would like to operate the At-Risk Afterschool Program please list:
- Site Name
- Site Address
- Qualifying school

☐ Do you offer enrichment/educational activities?
- ***For Profit Sponsors Only***- For Profit organizations must ensure that 25% of the children in care (based on total attendance or license capacity-whichever is less) are eligible for free and reduced-price meals to submit a claim each month. Would your site(s) meet this requirement? (N/A for FDCH Sponsors)

SFSP Operation- SFSP Sponsors only

☐ Do have experience operating the SFSP (or SSO) as a sponsor or at the site level?

☐ Do you provide a year-round public service?

☐ As a sponsoring organization for the SFSP, do you have the capacity to exercise management control over a single site or multiple sites and conduct site visits throughout the summer?

☐ Would you be interested in having your site(s) under the management of a current sponsoring organization as opposed to your organization becoming a new SFSP sponsor?

☐ How many sites do you plan to operate?

☐ Anticipated start/end dates for SFSP participation

☐ What meals do you plan to serve and claim for reimbursement?

☐ What type of site(s) do you plan to operate?
- Open
- Restricted Open
- Closed Enrolled
- Camp
- Upward Bound
- Public Housing Development
- Migrant

☐ **Open** or **Restricted Open Sites**
- Open and Restricted Open sites must be area eligible.

☐ **Closed Enrolled** or **Public Housing Developments (PHD)**
- Closed Enrolled sites or Public Housing Developments can qualify using area eligibility or income eligibility.
  - If income eligibility is used to qualify a site, at least 50% of the children enrolled must be eligible for free/reduced-price meals.
  - If area eligibility is used to qualify a site, the site must be located in an area where 50% or more of the children residing in the area are eligible for free or reduced-price school meals; this can be determined based off census or school data.

☐ List the following details when area eligibility is used to qualify a site:
- Site Name
- Site Address

- Qualifying School that is in the attendance area of this site along with the school's free and reduced-price eligible percentage (Reference OSPI's Area Eligibility Report for current percentages)

  OR

- Qualifying Census block group number – Use No Kid Hungry's Averaged Eligibility map to determine the site's eligibility

National School Lunch Program, School Breakfast Program, Special Milk Program

EIN & Non-Profit Verification

Public or County Residential Child Care Institutions
- Upload documentation from the IRS with your EIN number
  - Documentation may include notice of your SS-4 application if you are a new organization that has not yet filed taxes under your new entity, or this could be your 147-C letter.

Private Schools, Private Residential Child Care Institutions
- Upload proof of 501(c)3 status determination letter from the IRS confirming tax exempt status

Next Steps

A program specialist will contact your organization once a review of your submitted New Sponsor Questionnaire has been completed. Thank you for your interest in operating a Child Nutrition Program.

Acronym Reference

- CNS- Child Nutrition Services
- CACFP- Child & Adult Care Food Program
- LEA- Local Education Agency
- NSLP- National School Lunch Program
- OSPI- Office of Superintendent of Public Instruction
- SBP- School Breakfast Program
- SFSP- Summer Food Service Program
- SMP- Special Milk Program
- USDA- United States Department of Agriculture