

SFA/School District: _____

LEA #: _____

P2 CEP Charter

Child Nutrition Original Agreement & Policy Statement Checklist 2019-2020

Return the following materials to Child Nutrition Unit by May 3, 2019:

Area Specialist

	Original Signatures of:		CNU use only		CNU Notes:	
			Complete	NA		
One copy of this Checklist						
C-Original Agreement	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
D-CN Program Schedule A (Completed by SFA/LEA)		<input type="checkbox"/> CND				
<i>Complete information for EACH school in the LEA; Schedule A signed by CND</i>						
Agreement Attachments / Assurances:						
E-Menu Planning Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
F-Food Safety Attestation		<input type="checkbox"/> CND				
G-Health Inspection Report		<input type="checkbox"/> CND				
H-Procurement Policy	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
I-Wellness Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
J-Civil Rights Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
K-Attestation Statements (Claims, Professional Dev.)	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
Policy Statement Attachments:						
L-Original of Policy Statement	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
M-Meal Count and Collection						
N-Pre-K Meal Service	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND <input type="checkbox"/> Pre-K Dir.				
O-Free and Reduced Price Materials Attestations	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
P-Methods Used to Distribute Meal Applications	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
Q-Date Flexibility	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
R-Child Nutrition Contact and Appeals Hearing Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				
<i>If applicable also return</i>						
S-Web-based Meal Applications	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND <input type="checkbox"/> Tech Coord.				
T-Afterschool Snack Schedule B-20	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND <input type="checkbox"/> ASP Coord.				
U-Seamless Summer Option Schedule C-20	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND				

Email completed materials by **MAY 3, 2019** to:
ADE.CNU-A-PS@arkansas.gov.

Date
Received
by CNU