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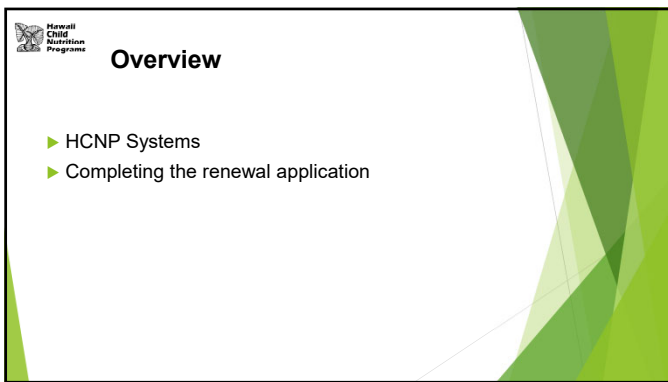
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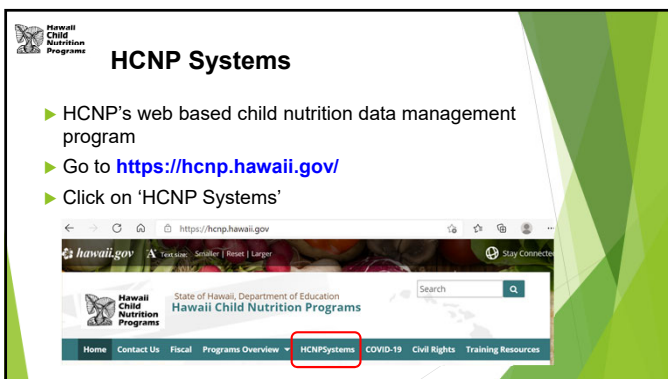
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## HCNP Systems

- Secure Log In
  - User Authorization Form
    - Available at: <https://hcnp.hawaii.gov/overview/nslp/>
    - Click on 'Program Resources'; 'HCNP Systems'





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## SY 21-22 Renewal Application

- Email notification was sent on May 6, 2021
  - "IMPORTANT: NSLP SY 2022 Renewal Application Due 6/18/21"
- Read the instructions carefully before completing the renewal application

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## HCNP Systems




Welcome to



Sign In

Enter User ID

Enter Password

Login

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## Select Program

Program Selection

Program Code	Program Description
<b>SNP</b>	School Nutrition Programs

[Sign Out](#)

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## Notice Board

Click Continue to go to the Program Year selection screen or select a Menu option



**School Nutrition Programs**

**E-mail:** Rachel.Itano@k12.hi.us  
**E-mail:** Kasey.Kawamoto@k12.hi.us  
**E-mail:** Shirley.Robinson@k12.hi.us

**Continue**

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## Select the Program Year

Program Year Selection

Program Year	Program Begin Date	Program End Date
2014	July 2013	June 2014
2015	July 2014	June 2015
2016	July 2015	June 2016
2017	July 2016	June 2017
2018	July 2017	June 2018
2019	July 2018	June 2019
2020	July 2019	June 2020
2021	July 2020	June 2021
<b>2022</b>	July 2021	June 2022

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## Renewal Application

- ▶ Must complete all three parts:
  - 1) Sponsor Application
  - 2) Site Application(s)
  - 3) Off-line Forms
- ▶ Application must be in **Pending Approval** status



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## Check that you are in Program Year 2022

Program Year: 2022

Sponsor: 1234-5-ABCDE School

Sponsor Summary

Checklist

Applications

Forms

Claims

Payments

Training

Users

Item

Required

On-Line Forms Description

Count/Date

Status

1.	<input checked="" type="checkbox"/>	Sponsor Application	Required to begin the enrollment process.		
2.	<input checked="" type="checkbox"/>	Site Application(s)		0 of 2	

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## Add Sponsor Application

Sponsor Summary

Checklist

Applications

Forms

Claims

Payments

Training

Users

Number


Name

Revision

Status

Date Approved

Action

Sponsor Application					
Site Application(s)					
123	ABCDE Elementary School				
456	ABCDE Middle School				

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## Sponsor Application

- ▶ Some information from the preceding Program Year will automatically transfer over
  - ▶ Address and Contact Information
- ▶ Information not carried over:
  - ▶ Vendor/FSMC and Contact Information
  - ▶ Wellness Policy
  - ▶ Verification Method
  - ▶ Meal Price Information
  - ▶ Single Audit Compliance

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## Sample Sponsor Application

**Vendor / Food Service Management Company and Contact Information**

If Sponsor contracts with a Vendor or Food Service Management Company (FSMC) for meals served at ANY of the Sponsor's sites, please complete information for each Vendor/FSMC the Sponsor contracts with.

Vendor / Food Service Management Company - 1

Vendor Type:

Vendor Name:

Address:

City St Zip:

Contract Begin Date:  End Date:  \$ Amount:  0.00

**Add Lines** Click "Add Lines" for additional Vendor / FSMCs

Contact Information:

Name:

Phone:  Ext:

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## Sample Sponsor Application

**Verification Method**

27. The Sponsor is requesting the following Verification selection method:

☐ Standard

☐ Alternate 1

☐ Alternate 2

☐ Not Required (RCCL, CEP District-wide, or Provision 2 or Provision 3 District-wide and not in a Base Year)

**USDA Eligibility Manual for School Meals:**  
[https://fns-prod.azureedge.net/sites/default/files/cn/SP36\\_CACFP15\\_SFSP11-2017a1.pdf](https://fns-prod.azureedge.net/sites/default/files/cn/SP36_CACFP15_SFSP11-2017a1.pdf)

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### Sample Sponsor Application

29. Do students pay for meals at any of the Sponsor's sites? ☒ Yes ☐ No

If Yes, enter the Meal Pricing information below:

	Breakfast		Lunch		After School Snack		Special Milk
	Paid	Redo	Paid	Redo	Paid	Redo	Paid
30. Preschool	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31. Elementary	3.00	0.30	4.50	0.40	0.00	0.00	0.00
32. Middle/Jr High/Intermediate	3.00	0.30	4.50	0.40	0.00	0.00	0.00
33. High School	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34. Adult	3.75		5.50		0.00		

If the Sponsor operates the Special Milk Program, enter the average cost of 1/2 pint of milk: 0.00

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### Sponsor Application

- Verify existing information and make any changes
- Add information that is not carried over
- Enter the information that is not carried over
- Certify the information (field 42) and submit the Sponsor Application
- If any errors are identified, correct all errors and resubmit

**Certification Statement**

The certification statement should only be checked after the form entry is complete and is ready to be submitted to the state for review. If the data is incomplete or the form has errors the certification check will not be saved. Editing the form after it has been certified will require the certification statement to be rechecked.

42. ☒ By submitting this application to the State Agency for approval, the Sponsor certifies that all information provided herein is true and accurate, that the Sponsor will directly operate the Program and accept final administrative and financial responsibility for all sites under its jurisdiction. The Sponsor and all sites under its jurisdiction will comply with all provisions of FCPR 210, FCPR 220, FCPR 225, FCPR 226, FCPR 240, FCPR 245, FCPR 246, FCPR 247, FCPR 248, FCPR 249, FCPR 250, FCPR 251, FCPR 252, FCPR 253, FCPR 254, FCPR 255, FCPR 256, FCPR 257, FCPR 258, FCPR 259, FCPR 260, FCPR 261, FCPR 262, FCPR 263, FCPR 264, FCPR 265, FCPR 266, FCPR 267, FCPR 268, FCPR 269, FCPR 270, FCPR 271, FCPR 272, FCPR 273, FCPR 274, FCPR 275, FCPR 276, FCPR 277, FCPR 278, FCPR 279, FCPR 280, FCPR 281, FCPR 282, FCPR 283, FCPR 284, FCPR 285, FCPR 286, FCPR 287, FCPR 288, FCPR 289, FCPR 290, FCPR 291, FCPR 292, FCPR 293, FCPR 294, FCPR 295, FCPR 296, FCPR 297, FCPR 298, FCPR 299, FCPR 300, FCPR 301, FCPR 302, FCPR 303, FCPR 304, FCPR 305, FCPR 306, FCPR 307, FCPR 308, FCPR 309, FCPR 310, FCPR 311, FCPR 312, FCPR 313, FCPR 314, FCPR 315, FCPR 316, FCPR 317, FCPR 318, FCPR 319, FCPR 320, FCPR 321, FCPR 322, FCPR 323, FCPR 324, FCPR 325, FCPR 326, FCPR 327, FCPR 328, FCPR 329, FCPR 330, FCPR 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### Add Site Application

**Sponsor Summary**

ABCDE School (1234-5)

Checklist **Applications** Forms Claims Payments Training Users

Number	Name	Revision	Status	Date Approved	Action
Sponsor Application		0	Pending Submission		
<b>Site Application(s)</b>					
123	ABCDE Elementary School				
456	ABCDE Middle School				

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## Site Application

- ▶ Most information from the previous year's approved Site Application will carry over
  - ▶ Contact Information
  - ▶ Program Participation Information (NSLP, SBP, FFVP)
  - ▶ Accountability Information
- ▶ Information not carried over:
  - ▶ Program Participation (ASP, SSO)
  - ▶ Food Safety Inspection Information

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## Sample Site Application

General Information

15. Site Type:

16. Campus Type:

17. Classification of Site:

18. ☐ Yes ☒ No Is this Site a Year Round School?

19. If Yes, what is the number of days in the Vacation Period?

20. ☒ Yes ☐ No Are meals served in locations other than the regular dining areas (such as classrooms, kiosks, other buildings, gyms, etc.)?

21. If Yes, how many other locations?

22. ☐ Yes ☒ No Does this site regularly serve meals to students off campus?

23. If Yes, how many off campus locations?

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## Sample Site Application

- ▶ Residential Child Care Institutions (RCCIs) ONLY:
  - ▶ Answer #24-25

24. If this is a Licensed Site, complete the following:

License Effective Date:  License Expiration Date:

25. License Number:

➔ (Submit a copy of current License to HCNF)

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## Sample Site Application

► **Do NOT** complete the CEP section

**Community Eligibility Provision**

Site data in this section should be entered specific to this individual site. Total Enrollment is the total number of students with access to this site's NSLP and SBP. Site Identified Students is the number of identified students only for this site.

CEP data is required for CEP participation. The CEP ISP should be entered according to how the site is participating in CEP: individual site ISP, aggregate group ISP for a group of schools, or aggregate SFA-wide ISP. When the site is participating as part of a group of schools or as part of the SFA-wide group, a group name must be entered exactly the same for each site participating in that group.

Year 1  
(2022)

33. Total Site Enrollment:

34. Site - Identified Students:

35. Site ISP:

36. Site Free Claiming %:

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## Sample Site Application

**National School Lunch Program**

41. Participation: Regular Claiming

42. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

43. ☒ Yes ☐ No Do students pay for Lunches at this Site?

44. Select Grades - Offer vs Serve (OVS) is implemented (Offer vs Serve is required for Grades 9, 10, 11, 12)

Ungraded												Head Start/Early Enrolled		PreSchool		Kindergarten	
1	2	3	4	5	6	7	8	9	10	11	12						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

45. Lunches Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**School Breakfast Program**

46. Participation: Regular Claiming **Eligible for Service Need Breakfast**

47. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

48. ☒ Yes ☐ No Do students pay for Breakfast at this Site?

49. Select Grades - Offer vs Serve is implemented:

Ungraded												Head Start/Early Enrolled		PreSchool		Kindergarten	
1	2	3	4	5	6	7	8	9	10	11	12						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

50. Breakfast Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## SY 21-22 Renewal Application

► If your SFA would like to participate in the following three meal services:

- SSO: Breakfast and Lunch
- NSLP ASP

► You will get an error message on the site application

► Email the NSLP Team to clear the error message

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**Hawaii Child Nutrition Programs**

**After School Snack Program**

55. Participation:  Site Eligibility: Greater than or equal to 50%

56. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

57. Snack Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

58. Time Snack Program Begins:

59. Contact Name:  Phone:

60. Snack Eligibility:

☐ Not Area Eligible - Site F/R eligibility less than 50%

☐ Area Eligible - Site F/R eligibility 50% or greater

☐ Area Eligible - Attendance Area F/R eligibility 50% or greater

61. If Area Eligible by Attendance Area enter the name of the closest school with 50% or greater F/R eligibility:

School / Site Name:

62. Site Number:

63. Program Name:

64. Activities:

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**Hawaii Child Nutrition Programs**

**Fresh Fruit and Vegetable Program**

65. Participation:  Not Participating  Not Eligible for Fresh Fruit and Vegetable Program

66. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

67. Contact Name:  Address 1:

68. Title:  Address 2:

69. E-mail:  City:

70. Phone:  Ext:  State:  Zip Code:

71. Fax:

72. Describe the FFVP implementation plan for this site. Include a description of how the FFVP will be integrated, with other efforts, to promote good health and nutrition, reduce obesity and encourage physical activity. Examples: Integrated nutrition education in the daily curriculum, using free USDA Team Nutrition materials, incorporating the FFVP into the school's Wellness Policy.

73. Describe how free fresh fruits and vegetables will be made available to all enrolled students at this site during the school day, outside of the NSLP and SBP meal periods. Examples: Cans or stands in the hallway, fruits and vegetables in classrooms, vending machines dispensing free fruits and vegetables.

74. Describe partnership activities already established or planned as part of the FFVP implementation at this site. For each partnership listed include if the partner is contributing, or will contribute non-Federal resources to the FFVP. Examples of partnerships: Local growers, health departments, extension services, local grocers, or fruit and vegetable industry representatives.

By submission of this application the School District administration, the school administration, and School Food Service certify that the Fresh Fruit and Vegetable Program will be implemented and maintained according to the policies and procedures required by the USDA. Further, the school administration and the School Food Service agree to participate in any USDA approved evaluations and to provide information requested by the specified deadlines.

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**Hawaii Child Nutrition Programs**

**Seamless Summer Option (SSO)**

75. Participation:  Program Year: 2021 Sponsor: 1234-5-ABCDE School

76. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The sponsor **This is July 2021** meals to the neighborhood community by:

77. School Communication ☐ School Registration Form ☐ Press release ☐

78. Date of Public Media Notice:

79. Program Start Date:  Program End Date:

80. ☐ Yes ☐ No Does this Site serve meals only to children enrolled in summer school programs? (If this site intends to serve meals only to children enrolled in a summer school program, the site is not eligible to participate in the Seamless Summer Option. The site may receive reimbursement under the NSLP and/or SBP for meals served only to children enrolled in a summer school program.)

**This is June 2022. For SSO in June 2022, use the Site Application in Program Year 2021**

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82. ☐ Open Site - 1 ☐ Restricted Open Site - 2

82.A ☐ 1 - Site eligible based on the site's most recent October F/R eligibility 50% or Greater Eligibility: 0%

82.B ☐ 2 - This site is located in the attendance area of another School with most recent October F/R eligibility 50% or greater: Eligibility: 0%

School (Site) Number:

School Name:  You must enter a valid School Number

82.C ☐ 3 - Site eligible based on most recent Census data:

Census Year:

82.D Restricted Open Site -- explain why attendance is being restricted:

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83. ☐ Closed Enrolled Site - 3

83.A ☐ 4 - Site eligible based on the site's most recent October F/R eligibility 50% or Greater Eligibility: 0%

83.B ☐ 5 - This site is located in the attendance area of another School with most recent October F/R eligibility 50% or greater: Eligibility: 0%

School (Site) Number:

School Name:  You must enter a valid School Number

83.C ☐ 6 - Site eligible based on most recent Census data:

Census Year:

83.D ☐ 7 - Site eligible based on Free and Reduced Price eligibility of enrolled children (at least 50% of enrolled children must be Free or Reduced Price eligible)

Eligibility for children whose meals are claimed for reimbursement at this site is based on (one or more may be selected):

83.E ☐ Income applications obtained from the child's school

83.F ☐ Income applications submitted to the site and approved by SFA Sponsor

83.G ☐ Direct Certification conducted by SFA Sponsor

83.H Projected Number of enrolled children   
(FCFR 225.65x22.04)(6)

83.I Projected Number of enrolled children eligible for Free or Reduced Price Meals   
(FCFR 225.65x22.04)(6)

83.J Explain why the Sponsor is operating a closed enrolled site instead of an open site:

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**Seamless Summer Meal Service**

Meal Type	Offer vs Serve	Begin Time	End Time	Mon	Tue	Wed	Thu	Fri	Sat	Sun
86. <input type="checkbox"/> Breakfast	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87. <input type="checkbox"/> Snack	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. <input type="checkbox"/> Lunch	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89. <input type="checkbox"/> Supper	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

90. Estimated Average Daily Attendance:

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**Food Safety Inspection**

91. 1<sup>st</sup> Annual Inspection:

☒ Received a health inspection during school year 2020 - 2021.

92. Enter date inspection occurred:

☐ A health inspection was requested during school year 2020 - 2021, but was not completed. (enter if request is available)

☐ No health inspection was requested during school year 2020 - 2021.

93. 2<sup>nd</sup> Annual Inspection:

☐ Received a health inspection during school year 2020 - 2021.

94. Enter date inspection occurred:

☒ A health inspection was requested during school year 2020 - 2021, but was not completed. (enter if request is available)

☐ No health inspection was requested during school year 2020 - 2021.

95. ☐ This school has received three or more Health Inspections.

**Food Safety Inspection**

91. 1<sup>st</sup> Annual Inspection:

☐ Received a health inspection during school year 2020 - 2021.

92. Enter date inspection occurred:

☒ A health inspection was requested during school year 2020 - 2021, but was not completed. (enter if request is available)

☐ No health inspection was requested during school year 2020 - 2021.

93. 2<sup>nd</sup> Annual Inspection:

☒ Received a health inspection during school year 2020 - 2021.

94. Enter date inspection occurred:

☐ A health inspection was requested during school year 2020 - 2021, but was not completed. (enter if request is available)

☐ No health inspection was requested during school year 2020 - 2021.

95. ☐ This school has received three or more Health Inspections.

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
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**Accountability Procedures**

96. Collection and Meal Counting Method:

☐ Name Checklist/Roster

☐ Tickets

☐ POS Computer System

☐ Other

If "POS Computer System" is selected for Meal Counting Method please enter the following:

97. Brand Name of the POS Computer System:

98. POS Computer System data input method:

PIN	Barcode Reader	Verbal Identifier
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

99. If "Other" is selected for Collection and Meal Counting Method enter description of Procedure used:

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100. Student Payments made by:

☐ Cash in Serving Line

☐ Prepaid Daily

☐ Prepaid Weekly

☐ Prepaid Monthly

☐ Monthly Billing

☐ Non-Pricing

101. Point of Service (Meals are counted):

☒ End of Line ☐ Exception

102. ☐ **Standard Exception Procedures** - Check here if the following procedures are followed.

**Procedures:** Due to the physical facilities, a more accurate meal count occurs when the official count is made at the beginning of the serving line with an adult checking each tray for a reimbursable meal at the end of the serving line. Sufficient supervision and barriers will be positioned to prevent any student from leaving or entering the serving line between these two points. If a non-reimbursable meal is identified, appropriate corrective action will be taken regarding the child's selection or the meal will not be counted as reimbursable in any category. A kitchen and office meal count will continue to be reconciled daily for accuracy.

103. If **Exception** is selected but the above Standard Exception Procedures are not used, describe the SFA's procedure:

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## Site Application

- Verify existing information and make any changes
- Add information that is not carried over
- Certify (field 104) and submit application
- If any errors are identified, correct errors and resubmit

**Certification Statement**

The certification statement should only be checked after the form entry is complete and is ready to be submitted to the state for review. If the data is incomplete or the form has errors the certification check will not be saved. Editing the form after it has been certified will require the certification statement to be rechecked.

104. ☒ The person submitting this information sheet is authorized to submit the information on behalf of the Sponsor. By submitting this information to the State Agency for approval, the Sponsor certifies that all information provided herein is true and accurate, that the site has been visited to ensure it has the capability and the facilities to provide the meal service planned for the number of children anticipated to be served. The Sponsor acknowledges that this information is being given in connection with the receipt of Federal funds and that deliberate misrepresentation may subject the Sponsor to prosecution under applicable State and Federal criminal statutes.

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## Off-line Forms

- Off-line forms must be submitted to HCNP as part of the renewal application
  - Upload off-line forms by clicking the upload button 
- Forms marked with the red check mark  are **REQUIRED**
- Single Agreement
  - Must be signed and submitted by all SFAs

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## Sponsor Summary

ABCDE School (1234-5)

Item	Require	On-Line Forms Description	Submitted	Date Sent	Date Received	Date Complete	Action
1		Sponsor Application					Pending Submission
2		Site Application(s)					Pending Submission
1		Single Agreement					
2		Free and Reduced-Priced Meal Policy Statement					
3		Authorizing Officials for Free and Reduced-Priced Applications					
4		Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal					
5		FIMAC Contract					
6		Vended Meals Contract					
7		Intergovernmental Agreement for Vended Meals					
8		On-Campus Meal Service and Counting Locations					
9		W-9					
10		501(c)(3) Documentation					
11		Hawaii Tax ID Numbers					
12		Licensing					
13		Detachment & Suspension					
14		Fresh Fruit and Vegetable Program Application					

Enter Dates for Required Off-Line Forms

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**Hawaii Child Nutrition Program**

**Sponsor Summary** ABCDE School (1234-5)

Item	Required	On-Line Forms Description	Count	Date	Status
1.	✓	Sponsor Application	2 of 2		Pending Submission
2.	✓	See Application(s)			Pending Submission

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	✓	Single Agreement	✓				⬇️
2.	✓	Free and Reduced Price Meal Policy Statement	✓				⬇️
3.	✓	Authorizing Officials for Free and Reduced-Price Applications	✓				⬇️
4.	✓	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal	✓				⬇️
5.	✓	Fiscal Contract	✓				⬇️
6.	✓	Vended Meals Contract	✓				⬇️
7.	✓	Intergovernmental Agreement for Vended Meals	✓				⬇️
8.	✓	On-Campus Meal Service and Counting Locations	✓				⬇️
9.	✓	W-9	✓				⬇️
10.	✓	SCU(C) Documentation	✓				⬇️
11.	✓	Hawaii Tax ID Numbers	✓				⬇️
12.	✓	Lodging	✓				⬇️
13.	✓	Department & Supervisor	✓				⬇️
14.	✓	Fresh Fruit and Vegetable Program Application	✓				⬇️

Enter Dates for Required Off-Line Forms

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**Hawaii Child Nutrition Program**

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	✓	Single Agreement	✓				⬇️
2.	✓	Free and Reduced Price Meal Policy Statement	✓	5/10/2021	5/10/2021		⬇️
3.	✓	Authorizing Officials for Free and Reduced-Price Applications	✓				⬇️
4.	✓	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal	✓				⬇️

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**Hawaii Child Nutrition Program**

**Final Steps**

*Important*

- ▶ At the bottom of the Checklist tab, you should see "Submit to the State for Approval"
- ▶ Click to submit your renewal application to the State for approval
- ▶ Check that your application is in **"Pending Approval"** status

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**Sponsor Summary** ABCDE School (1234-6)

Item	Required	On-Line Forms Description	Count	Date	Status	Users
1.	✓	Sponsor Application	2 of 2		Pending Submission	
2.	✓	Site Application(s)	2 of 2		Pending Submission	

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	✓	Single Agreement	5				Download
2.	✓	Free and Reduced Price Meal Policy Statement	5	5/10/2021	5/10/2021		Download
3.	✓	Authorizing Officials for Free and Reduced-Price Applications	5	5/11/2021	5/11/2021		Download
4.	✓	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal	5	5/11/2021	5/11/2021		Download
5.	✓	FSARC Checklist					Download
6.	✓	Vendor Meal Contract		5/11/2021	5/11/2021		Download
7.	✓	Intergovernmental Agreement for Vended Meals					Download
8.	✓	On-Campus Meal Service and Counting Locations	5	5/11/2021	5/11/2021		Download
9.	✓	W-9	5				Download
10.	✓	SF1503: Documentation	5				Download
11.	✓	Hawaii Tax ID Numbers	5				Download
12.	✓	Lobbying	5				Download
13.	✓	Document & Supervisor	5				Download
14.	✓	Fresh Fruit and Vegetable Program Application	5	5/11/2021	5/11/2021		Download

Enter Dates for Required Off-Line Forms

Submit all forms to the State for Approval

**Remember to do this last step**

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**Sponsor Summary** ABCDE School (1234-6)

Item	Required	On-Line Forms Description	Count	Date	Status	Users
1.	✓	Sponsor Application	2 of 2		Pending Approval	
2.	✓	Site Application(s)	2 of 2		Pending Approval	
3.	✓	Forms Submitted to State for Approval	05/11/2021		Pending Approval	

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	✓	Single Agreement	5				Download
2.	✓	Free and Reduced Price Meal Policy Statement	5	5/10/2021	5/10/2021		Download
3.	✓	Authorizing Officials for Free and Reduced-Price Applications	5	5/11/2021	5/11/2021		Download
4.	✓	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal	5	5/11/2021	5/11/2021		Download

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**Sponsor Summary** ABCDE School (1234-6)

Item	Required	On-Line Forms Description	Count	Date	Status	Users
1.	✓	Sponsor Application	2 of 2		Pending Approval	
2.	✓	Site Application(s)	2 of 2		Pending Approval	
3.	✓	Forms Submitted to State for Approval	05/11/2021		Pending Approval	

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	✓	Single Agreement	5				Download
2.	✓	Free and Reduced Price Meal Policy Statement	5	5/10/2021	5/10/2021		Download
3.	✓	Authorizing Officials for Free and Reduced-Price Applications	5	5/11/2021	5/11/2021		Download
4.	✓	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal	5	5/11/2021	5/11/2021		Download

## Approval Process

- ▶ NSLP Specialist will review the Sponsor Application, Site Application(s), and Off-line forms
- ▶ Specialist will either approve the renewal or send forms back to the SFA for correction
- ▶ SFA must make all corrections and resubmit the application
- ▶ The application is approved when the status is 'Approved'

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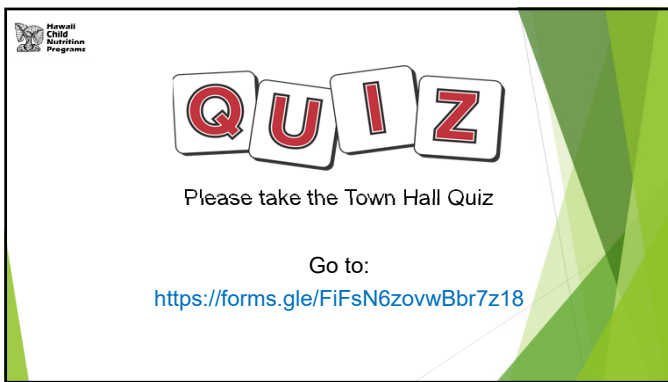
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**Harvest  
Child  
Nutrition  
Program**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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To file a program complaint of discrimination, complete the <https://www.usda.gov/sites/default/files/documents/USDA-OASCRHS-20P-Complaint-Form-0508-0002-508-11-28-177.pdf> found online at <https://www.usda.gov/owrc/how-to-file-a-program-discrimination-complaint>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9952. Submit your completed form or letter to USDA by:

(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](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

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