




FNS-742 Verification Collection Report


RCCI and CEP SFAs
SY 2025-26






FNS-742 – What is it?

- ▶ The FNS-742, also known as the **Verification Collection Report**, is an annual report submitted to the USDA
- ▶ It is a report that explains the results of verification for each participating SFA, and must be completed by **ALL** SFAs, including *Community Eligibility Provision (CEP) Schools* and *Residential Child Care Institutions (RCCI)*
- ▶ As an SFA, you are responsible for completing the report and submitting it to HCNP for processing and forwarding







FNS-742 Deadline

- ▶ Submit Verification Collection Report (FNS-742) in HCNP Systems by **December 12, 2025**


MARK YOUR
CALENDAR!

Hawaii Child Nutrition Programs

FNS-742 in HCNP Systems

- Log into HCNP Systems
 - <https://hi.cnpus.com/cnp/Login>

Form Name	Revision	Status	Date Approved	Action
October Survey		Survey to be filled on last day of October 2025		
Verification Report		Complete the verification process no later than November 15. Complete the SFA Verification Collection Report (FNS-742) by the announced deadline.		









- Go to the Forms tab
- Click the + symbol for the Verification Report (circled in red above)

Hawaii Child Nutrition Programs

Section 1 – Sites and Students

Section 1 - Sites and Students

All SFAs must report Section 1

		A. Number of Schools OR Institutions	B. Number of Students
Total Schools, Residential Child Care Institutions (RCCIs) and Enrolled Students	1-1: Total schools (Do not include RCCIs):		
	1-2: Total RCCIs (Do not include schools counted in 1-1):		
	1-2a: RCCIs with day students (Report only day students in 1-2aB):		
	1-2b: RCCIs with NO day students:		















- CEP SFAs:** Complete 1-1A: Total Number of Schools/Sites and 1-1B: Total Number of Students (**red boxes**)
- RCCIs ONLY:** DO NOT complete 1-1A or 1-1B. Instead, complete lines 1-2A, 1-2B, 1-2bA, and 1-2bB (**yellow boxes**)
- These numbers must be reflective of the **last operating day in October**

Hawaii Child Nutrition Programs

Section 2 – Alternate Provisions

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ONLY SFAs with alternate provisions must report Section 2

		A. Number of Schools AND Institutions	B. Number of Students
SFAs with schools operating alternate provisions	2-1: Operating Prov 23 in Base Year for NSLP or SBP:		
	2-2: Operating Prov 23 in NON BASE year for NSLP and SBP:		
	2-2a: Provision 23 students reported as FREE in a NON BASE year:		
	2-2b: Provision 23 students reported as REDUCED PRICE in a NON BASE year:		
	2-3: Operating the Community Eligibility Option:		
	2-4: Operating other alternatives for NSLP and SBP:		
2-5: Operating an alternate provision(s) for only SBP or only NSLP:			

- CEP SFAs:** Complete both 2-3A and 2-3B (**red boxes**) entering the same numbers entered in Section 1
- RCCIs:** Skip Section 2 and proceed to Section 3

Hawaii Child Nutrition Programs

Section 3 – Direct Certification

Section 3 - Direct Certification

ALL SFAs must report Section 3 or check box 3-1 if applicable

		B. Number of FREE Students
Students approved as FREE eligible NOT subject to verification	3-1 <input checked="" type="checkbox"/> Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP (i.e. NON BASE year Provision 2/3 for all schools).	
	3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP). Do not include students certified with SNAP through the letter method.	
	3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF) or Medicaid, and those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.	
	3-4: Students certified categorically FREE eligible through SNAP letter method: Include students certified for free meals through the family providing a letter from the SNAP agency.	

► **RCCIs and CEP SFAs:** check box 3-1, skip Section 4, and proceed to Section 5

Hawaii Child Nutrition Programs

Section 5 – Free and Reduced Applications (not directly certified)

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ALL SFAs must report Section 5 or check box 5-1 if applicable

5-1 ☒ Check the box only if all schools and/or RCCIs are exempt from verification (see instructions for list of exemptions). If 5-1 is checked, no further reporting in Section 5 is required.

5-2: Was Verification performed and completed? <input type="checkbox"/> Yes, completed by November 15th <input type="checkbox"/> Yes, completed after November 15th <input type="checkbox"/> No, verification was NOT performed or the process was not completed.	5-3: Type of Verification process approved on the Sponsor Application: 1. <input type="checkbox"/> Standard (Lesser of 3% or 3,000 error-prone) 2. <input type="checkbox"/> Alternate one (Lesser of 3% or 3,000 selected randomly) 3. <input type="checkbox"/> Alternate two (Lesser of 1% or 1,000 error prone applications PLUS lesser of one-half of one percent of 500 applications with SNAP/TANF/FDPIR case numbers)
Report all applications as of October 1st considered error prone If 1 or 3 is checked in 5-2, report 5-4. If 2 is checked in 5-2, enter "N/A" in 5-4.	5-4: Total ERROR PRONE applications: <input type="text"/> Mandated size of verification sample: <input type="text"/> 0 5-5: Number of applications selected for verification sample: <input type="text"/>

► After skipping Section 4, both RCCIs and CEP SFAs will check Box 5-1. Do not complete anything else in Section 5. Proceed to Section 6.

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Section 6 – Verification for Cause / Certification

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VC-1: Total questionable applications verified for cause (Enter "N/A" if not applicable):

Report the number of applications as of November 15th verified for cause in addition to the verification requirement.

► Before signing and submitting form, both RCCIs and CEP SFAs must enter "N/A" in VC-1. Do not include quotations, enter exactly as **N/A**




Section 6 – Verification for Cause / Certification

6-1: Prepared by: Phone Number: Ext: E-Mail:

6-2: ☒ Check here when Verification information is complete and ready to submit to the State Agency.

Save **Exit**



- ▶ Complete the report by entering your information in 6-1 and **check** Box 6-2.
- ▶ Click the Save button. If any errors are identified, correct all errors and click Save.
- ▶ Double check that the Verification Report is in **'Pending Approval'** status. HCNP will review for accuracy and let you know if any changes are needed.



QUIZ TIME!


▶ **Link to Google Forms Quiz:**
<https://forms.gle/U6yZUm9J1wK7eUAY8>

Code word: verification report

Contact the NSLP Team:

Rachel Itano rachel.itano@k12.hi.us
 Kasey Kawamoto kasey.kawamoto@k12.hi.us



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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20-%20Complaint-Form-0508-2002-508-11-28-177a7361.pdf> from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

fax:
(833) 256-1665 or (202) 690-7442; or

email:
program.intake@usda.gov

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