

**TO:** Summer Food Service Program Sponsors  
**FROM:** Gail Lombardi, Education Specialist, Maine Department of Education  
**DATE:** March 8, 2011  
**RE:** Summer Food Service Program Electronic Filing

Welcome to the 2011 Summer Food Service Program (SFSP)! While warm summer days seem distant, it is time to file the Summer Food Service Application. The Application and the Site Information Sheets are ready for filing electronically. We look forward to working with you as we prepare for summer.

**On-line applications should be submitted by April 30, 2011 to be guaranteed commodities.** Please note that applications submitted after April 30, 2011 cannot be assured of receiving Commodities.

**FOR ALL SPONSORS:** We have included in this packet detailed instructions for completing the Application and Site Information Sheets and instructions on how to order Commodities. *Please refer to this information when filing forms electronically.* The following are included:

1. Steps to File Summer Food Service Application, **Sponsor Level.**
2. Steps for **Legal Agent** to Approve the Application, etc.
3. Line-by-line Instructions for the SFSP Application.
4. Line-by-line Instructions for the SFSP Site Information Sheet.
5. Food Distribution Program Electronic Ordering Process.

The web address to access the Summer Food Service Program site is:

<http://www.maine.gov/education/sfs/sfsp.htm>

**FOR RETURNING SPONSORS:** Those who already have an I.D. and Password, log on to the web address above to complete the forms. Follow the “Steps to File the Summer Food Service Application” and the “Steps to File the Site Information Sheet” on the attached pages. If there has been a change at the Sponsor (School) Password Level or Legal Agent Password Level, please contact the State Agency at the number below before continuing.

**FOR NEW SPONSORS:** Contact Nanci Stitt-Kittredge at (207) 624-6877 or email [nanci.kittredge@maine.gov](mailto:nanci.kittredge@maine.gov) to obtain an I.D. and Password. Should you have questions about becoming a Sponsor or need more detailed information about filing on-line, contact Gail Lombardi at (207) 624-6876, email [gail.lombardi@maine.gov](mailto:gail.lombardi@maine.gov).

**APPROVAL OF SPONSORS:** Email will be used to communicate the status of the Application and Site Information Sheets. A reminder email will also be sent to the Sponsor (Legal Agent) when the Application has been approved and the Agreement needs to be signed. If email addresses have changed please notify our office with the new address.

**Attendance at Summer Training is a requirement for participation  
in the Summer Food Service Program.**

**New Sponsors**

**For New Sponsors,** training will take place on **Wednesday, March 30, 2011 at the Burton Cross State Office Building, 1<sup>st</sup> Floor, Room 103, Augusta, from 1:00 – 4:00 p.m.**

**Training for Camp Sponsors**

**Training for Camp Sponsors** is scheduled for **Friday, April 22, 2011 at the Burton Cross State Office Building, Room 103, Augusta, from 1:00 – 4:00 p.m.**

**Training for Schools and Day Camp Programs**

**Training for Schools and Day Camp Programs** is scheduled on **Thursday, April 28, 2011 at the Burton Cross State Office Building, Room 103, Augusta from 1:00 – 4:00 p.m.**

**To register for training,** please contact Amy Webb by email [amy.webb@maine.gov](mailto:amy.webb@maine.gov) or telephone (207) 624-6842.

**Maine Department of Education  
Child Nutrition Services  
School Food Service – (SFS-SF)**

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Please visit the Summer Food Service Program section of our web site for more information at <http://www.maine.gov/education/sfs/sfsp.htm>

The Summer Food Service Forms are available on the Department of Education Forms Page at <http://www.maine.gov/education/forms/childnutrition/sfsp/summerforms.htm>

If you have not yet joined the Child Nutrition Listserv, please go to: <http://mailman.informe.org/mailman/listinfo/child.nutrition> and enter your email address, name and district information.

**STEPS TO FILE SUMMER FOOD SERVICE APPLICATION**

**Sponsor Level Password**

(Completed Yearly)

1. Obtain ID and Password
2. Select “File Forms”
3. Enter ID and Password
4. Select system “School Food Service-Summer Food”
5. Select “Application Form”
6. Select “File New Sponsor Application”
7. Enter year (4 places)
8. Complete the Application – See Line-by-Line Instructions for detailed information.
9. Click “Review”
10. Click “INSERT”
11. Notify the Legal Agent that the Application is complete and waiting for approval.

**STEPS TO REVISE THE APPLICATION**

**Sponsor Level Password**

1. Go to SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
2. Select “File Forms”
3. Enter ID and Password
4. Select system “School Food Service-Summer Food”
5. Select “Application Form”
6. Select “Sponsor List”
7. Click on the year of application you wish to revise.
8. Revise information.
9. Select “Review” and check information.
10. Click “UPDATE”
11. Notify legal agent you made changes to the Application and that it needs approval.

Questions? Contact

Nanci 624-6877

[nanci.kittredge@maine.gov](mailto:nanci.kittredge@maine.gov)

Gail 624-6876

[gail.lombardi@maine.gov](mailto:gail.lombardi@maine.gov)

**STEPS TO FILE SITE INFORMATION SHEET  
Sponsor Level Password  
(Completed Yearly)**

1. Obtain ID and Password
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”.
4. Enter ID and Password.
5. Select system “School Food Service – Summer Food”.
6. If this is a new site, select “Add New Site”. (If not new, go to Step # 9.)
7. Complete the information for the New Site.
8. Click “Insert”.
9. If this was a site the previous year, select “Site Forms”.
10. Select a site and click “Submit”
11. Select “Site Information Sheet”
12. Select “New Site Information Sheet”
13. Enter “Fiscal Year” (4 places)
14. Complete Site Information Sheet – See Instructions for detailed information.
15. Enter “Review”
16. Click “ACCEPT”
17. Notify the Legal Agent that the Site Information Sheet is ready for approval.

**STEPS TO REVISE THE SITE INFORMATION SHEET  
Sponsor Level Password**

1. Obtain ID and Password
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”
4. Enter ID and Password
5. Select system “School Food Service-Summer Food”
6. Select “Site Forms”
7. Select a site and click “Submit”
8. Select “Site Information Sheet”
9. Select “Site Information Sheet List”
10. Click on the year of the Site Sheet you wish to revise.
11. Correct the information. You will only be able to change 4 things: the number of meal service days, meal service times, the number of meals, and/or the eligibility data.
12. Enter “Review”
13. Click “UPDATE”
14. Notify Legal Agent that Site Sheet has been changed and is ready for approval.

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School Food Service – Summer Food (SFS-SF)**

**STEPS TO CHANGE YOUR PASSWORD**

1. Obtain ID and Password
2. Go to the SFSR system web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”
4. Enter ID and Password
5. Select system “School Food Service-Summer Food”
6. Select “Change Password”
7. Enter your “old” password.
8. Enter your new password in both boxes.
9. Click “Submit”.
10. Password is changed.

Questions? Contact	Nanci	624-6877	nanci.kittredge@maine.gov
	Gail	624-6876	gail.lombardi@maine.gov

**STEPS FOR LEGAL AGENT TO APPROVE THE APPLICATION**

1. Obtain ID and Password
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”
4. Enter ID and Password
5. Select system “School Food Service – Summer Food”
6. Select “Application Approval”.
7. Select the Application.
8. Review the Application information.
9. Click “APPROVED”.

**STEPS FOR LEGAL AGENT TO APPROVE SITE INFORMATION SHEETS**

1. Obtain ID and Password
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”
4. Enter ID and Password
5. Select system “School Food Service-Summer Food”
6. Select “Site Information Sheets”.
7. Select the site you will be approving and click on “Submit”.
8. Select the correct year and click “Submit”.
9. Review the Site information.
10. Click “APPROVED”.
11. Repeat Steps 6-9 for all other sites

Questions? Contact	Nanci	624-6877	nanci.kittredge@maine.gov
	Gail	624-6876	gail.lombardi@maine.gov

### STEPS FOR LEGAL AGENT TO ACCEPT AGREEMENT

**The Legal Agent accepts the Agreement AFTER the State Agency has approved the Sponsor Sites and Application. Sponsor will receive an email from the State Agency verifying approval of the Application.**

1. Obtain ID and Password
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”
4. Enter ID and Password
5. Select system “School Food Service-Summer Food”
6. Select “Agreement Form”.
7. Review the Agreement.
8. Click the “Accept” button.
9. Review Schedule A.

*When the Agreement is accepted the sponsor is approved to operate the SFSP.*

### STEPS FOR LEGAL AGENT TO APPROVE THE CLAIM FORM (Completed Monthly)

1. Obtain ID and Password.
2. Go to the SFSR web page: <http://www.maine.gov/education/sfsr1.htm>
3. Select “File Forms”.
4. Enter ID and Password.
5. Select system “School Food Service-Summer Food”
6. Select “Claim Form Approval” and click “Submit”.
7. Select the Claim Form you will be approving.
8. Review the Claim information.
9. Click “APPROVED”.

**Note: Any claim revisions require the Legal Agent to re-approve the claim before a payment is made.**

## INSTRUCTIONS for the Summer Food Service Program APPLICATION

- A. Obtain ID and Password from Nanci Stitt-Kittredge at 207-624-6877.
- B. After registering the Sponsor Legal Mailing Address and Type with DOE, log on to the internet site for the SFSP and complete the Application. The Legal Mailing Address is where the reimbursement will be sent.
- C. If the Legal Mailing Address or Summer or Winter Phone Number has changed from the previous year, the Sponsor must first contact DOE.

**Information for the first 4 entries is automatically inserted from the information given to DOE.**

Legal Mailing Address  
City, State, Zip  
Sponsor Phone Number: Summer  
Sponsor Phone Number: Winter

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- 1./2. Contact Person: First Name/Last Name:** Enter the first and last name of the person responsible for communication between the State Agency and the Sponsoring Organization. This person should be part of the day-to-day administration of the program.
  - 3. Fax Number:** Enter the fax number (including Area Code) if applicable. Do not enter any hyphens (ex. 2075551212)
  - 4. E-Mail Address:** Enter the year-round e-mail address of the Contact Person,.
  - 5. Does Sponsor Claim Non-profit Status?:** Answer “YES” if the Sponsoring Organization is recognized by the Internal Revenue Service as a 501(c)3 private, non-profit entity.
  - 6. Begin Meal Service (MM/DD/YYYY):** Indicate the earliest day (if more than one site) that reimbursable meals will be served. (Please see 2011 Calendar on next page)

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**2011 SUMMER FOOD SERVICE PROGRAM CALENDAR**

This calendar is provided to assist sponsors in determining the total number of days SFSP meals will be served.

JUNE						
SUN	MON	TUE	WED	THU	FRI	SAT
5	6	7	8	9	10	11
12	13	14 Flag Day	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

Total Operating Days in June = \_\_\_\_\_

JULY						
					1	2
3	4 Fourth of July	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Total Operating Days in July = \_\_\_\_\_

AUGUST						
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Total Operating Days in August = \_\_\_\_\_

SEPTEMBER						
				1	2	3
4	5 Labor Day	6	7	8	9	10

Total Operating Days in September = \_\_\_\_\_

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- 7. End Meal Service (MM/DD/YYYY):** Indicate the latest day (if more than one site) that reimbursable meals will be served.

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**NOTE:** The following entries: the Total Number of Projected Operating Days, the Projected Average Daily Attendance and the Total Number of Sites Submitted are automatically generated by the computer program and displayed on the completed Application.

The **Total Number of Projected Operating Days** includes Saturdays and Sundays, whether you are serving on these days or not. This is just an estimate and is only used to calculate Advances for those Sponsors requesting them. The actual number of operating days is used to calculate the actual reimbursement when filing the Claim later in the summer.

The information for the Projected Average Daily Attendance and the Total Number of Sites Submitted is generated from the Site Information Sheet(s) and is displayed AFTER the Sponsor has submitted all of the site information.

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- 8. Did the Sponsor Participate Last Year?** If the Sponsoring Organization participated in the SFSP last year, answer this question “YES”.
- 9. Does the Sponsor Provide an On-going Year-round Service to the Community?** This question refers to other programs/activities/services not related to the SFSP that the Sponsor operates throughout the year. For most sponsors the answer to this question is “YES”.
- 10. Does Sponsor Receive Funding from other Federal Programs?** If the Sponsor receives funds or other assistance from any other federal programs, enter “YES” in the appropriate box(es). Please be aware that the Sponsor cannot receive funds for meals served under the SFSP when it simultaneously participates in any other federally funded program.
- 11. Date of SFSP Training (MM/DD/YYYY):** Training SFSP personnel must occur before meal service begins. All site personnel must be trained. There must be documentation of the agenda used and those attending. A checklist for use in training is located in the SFSP Administrative Handbook.
- 12. June, July, or August Advance:** Advance payments are provided to help the Sponsor operate the SFSP. The Sponsor must plan to operate a meal service for at least 10 days of any particular month, certify that all staff are trained on program requirements and have a signed Agreement with the State Agency.
- 13. Has the State Division of Health Engineering, (DHHS), been notified of your intention to operate?** Enter “YES” if the kitchen where you will be making the meals for the SFSP currently has an official License to Operate. If you do not have a license to operate a food service, please contact the DHHS at (207) 287-5338.

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- 14. Will the Sponsor be using School Kitchen Facilities?** Enter “YES” if you are using school kitchen facilities.
- 15. Will the Sponsor be Contracting with a Food Service Management Company (FSMC)?** In Maine, the sponsor answers “YES” to this question if they have an ongoing relationship to a FSMC who is already preparing meals for the sponsoring organization. In this case the existing contract between the company and the sponsor is usually sufficient for SFSP needs if it is modified to include SFSP meal requirements. Some examples in this category include NYSP and Upward Bound programs. Please call the State Agency if you have further questions.
- 16. Did any of the personnel work for another SFSP or FSMC?** Enter “YES” if any personnel worked for a SFSP under another sponsor, or if they worked for a FSMC which provided meals to another sponsor of the SFSP.
- 17. Name of Person Authorized To . . . :** Enter the name of the person(s) holding the positions listed and responsible for performing the functions listed.
- 18. Will you receive income from funding sources other than the USDA to help finance the SFSP?** If “YES”, please provide the source(s) of the income and the amount of the funding in the boxes indicated. The funding source refers to all federal, state and local funds, not just SFSP funds. The total yearly expenditures from each source must be listed.
- 19. Will the sponsor limit or deny admission because of race, color, age, sex, disability, or national origin?** The sponsor must ensure that all children have equal access to services and facilities at the site.
- 20. Describe how and when the Public Release Statement will be announced:** All participating sponsors must inform potential participants, particularly minorities, of the availability of the SFSP. Describe how the public will be notified, the materials/medium you will be using, and the approximate date(s) the release will be made public.

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**21./22. PROJECTED OPERATIONAL AND ADMINISTRATIVE SALARIES**

**a./b. Title of Position and Number of Persons**

Evaluate your proposed program and estimate the types of positions and number of persons needed to operate and administer the program. Each sponsor’s staffing needs will differ based on the size of the program, the location, the type of meals served, the food preparation facilities, the skills of the available personnel, and the site(s) served. The SFSP Administrative Handbook has more information on staffing patterns.

The titles offered here are generic in nature. If the appropriate title for a position is not listed, substitute one of these, or use Other.

**c. Hours per Day on SFSP**

Enter the average number of hours worked each day for each position.

**d. Salary per Hour**

Enter the salary amount for each position. Salaries should be consistent with the amount paid for similar work in the local area. If the position will be filled by a volunteer, enter a “0”.

**e. Number of Days**

The number of days each person will work depends on the length of the program.

**Total Salary for the Program**

The system will provide the “Total Salary for the Program” by multiplying the Number of Persons, Hours Per Day, Salary per Hour, and Number of Days columns.

**Estimated Operational Salaries**

<b>Title of Position</b>	<b>Number of Persons</b>	<b>Hours per day on SFSP</b>	<b>Salary per Hour</b>	<b>Number of Days</b>	<b>Total Salary</b>
Cook					
Cook Assistants					
Site Supervisor					

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**Estimated Administrative Salaries**

<i>Title of Position</i>	<b>Number of Persons</b>	<b>Hours per day on SFSP</b>	<b>Salary per Hour</b>	<b>Number of Days</b>	<b>Total Salary</b>
<i>Director</i>					
<i>Coordinator</i>					
<i>Monitor</i>					
<i>Recordkeeper</i>					

If you will be working with a flat salary for the entire summer, the following is a formula to calculate the numbers needed to complete this part of the Application correctly. FOR EXAMPLE: The Head Cook is budgeted to receive \$5000 over the summer for 60 days.

1. Divide the Total Salary by the Total Number of Days Worked.

$$5000 \div 60 = 83.33$$

2. Divide the result by the number of hours worked each day.

$$83.33 \div 8 = 10.42$$

3. The Head Cook is receiving \$ 10.42 per hour.
4. Enter these numbers in the appropriate places on the Application (Projected Operational Salaries)

**23./24. PROJECTED OPERATIONAL AND ADMINISTRATIVE COSTS**

After estimating the 2011 budget (see Sample Budget Worksheet, next page) you will be able to determine the estimated costs for Operational and Administrative Costs. Not every program will need to budget costs for all the listed categories and some programs will have other costs not listed. For a detailed look at allowable program costs, please consult the SFSP Financial Guide (FNS Instruction 796-4) available from the State Agency.

Enter the estimated cost of each category for the entire program. **Do not use dollar signs or commas when completing this section. Also, if you are not including a certain category in your costs, enter “0” in that box.**

The amounts entered here will automatically roll forward and be listed as Total Projected Costs on the final copy of the Application.

**PROJECTED SFSP BUDGET WORKSHEET  
 2011**

**ESTIMATED PROGRAM ATTENDANCE**

	(a) Projected ADA		(b) Number of Days of Meal Service	=	(c) Total Meals Served During Summer
1. Breakfast	_____	X	_____	=	_____
2. Lunch	_____	X	_____	=	_____
3. Supper	_____	X	_____	=	_____
4. Snack	_____	X	_____	=	_____

**ESTIMATED PROGRAM OPERATIONAL FUNDS**

	Total Meals Served (from (c) above)		Operational Reimbursement Rate	=	Operational Program Funds Available
1. Breakfast	_____	X	<b>\$ 1.71</b>	=	\$_____ .00
2. Lunch	_____	X	<b>\$ 2.98</b>	=	\$_____ .00
3. Supper	_____	X	<b>\$ 2.98</b>	=	\$_____ .00
4. Snack	_____	X	<b>\$ 0.69</b>	=	\$_____ .00

**TOTAL OPERATIONAL FUNDS = \$\_\_\_\_\_ .00**

**ESTIMATED PROGRAM ADMINISTRATIVE FUNDS**

	Total Meals Served (from (c) above)		Administrative Reimbursement Rate	=	Administrative Program Funds Available
1. Breakfast	_____	X	<b>\$ 0.1700</b>	=	\$_____ .00
2. Lunch	_____	X	<b>\$ 0.3125</b>	=	\$_____ .00
3. Supper	_____	X	<b>\$ 0.3125</b>	=	\$_____ .00
4. Snack	_____	X	<b>\$ 0.0850</b>	=	\$_____ .00

**TOTAL ADMINISTRATIVE FUNDS = \$\_\_\_\_\_ .00**

## INSTRUCTIONS for the Summer Food Service Program SITE INFORMATION SHEET

### ADD/INSERT NEW SITE

- 1. Name of Meal Service Site:** Enter the name of the new site.
- 2. Site Type:** Depending on the Sponsor type, you are given a drop-down box with site types applicable to the Sponsor type.

**Open Sites:** These are geographic areas where at least 50 percent of the local children are eligible for free or reduced price meals, based on information provided by local school officials; or in geographic areas where 50 percent of the population is shown to be below 185 percent of the poverty level based on information provided by welfare or education agencies, zoning commissions, census tract data, or other appropriate sources. At open sites, meals are served to all children 18 years old and under with no registration or enrollment procedures required. Examples include: schools, parks, playgrounds, churches, etc.

**Enrolled Sites:** Sites that serve only identified groups of children, as opposed to the community at large. At least 50% of the enrolled children at the site must be eligible for free or reduced price school meals under the National School Lunch Program. Eligibility is based on income applications. Examples include: Boys and Girls Clubs, YMCAs, etc.

**Nonresidential Day Camps:** Sites that offer a regularly scheduled food service as part of a daily organized camping program for enrolled children. Camps are reimbursed only for meals served to children who meet the income eligibility criteria.

**Residential Camps:** Sites where enrolled children stay overnight as part of the regular program. Sponsors may claim reimbursement only for those meals served to children at the camp who meet the income eligibility criteria.

**NYSP – National Youth Sports Programs:** A day camp sponsored program. For more information regarding eligibility, please refer to the SFSP Administrative Handbook.

**Migrant Sites:** Open sites where a majority of the children being served are the children of migrant workers.

## SITE INFORMATION SHEET

The name and address of the Site automatically rolls up to the Site Information Sheet after inserting a new site.

- 1./2. Site Supervisor First Name/Last Name:** Enter the first and last name of the person trained by the Sponsor to be responsible for the operation of the meal service at the site.
- 3. Beginning Date of Meal Service:** Indicate the first day reimbursable meals will be served at this site.
- 4. Ending Date of Meal Service:** Indicate the last day reimbursable meals will be served at this site.
- 5. Number of Meal Service Days (May/June/July/August/September):** Indicate (by month) the total number of days reimbursable meals will be served. DO NOT count days when meals are not served – such as holidays or weekends, when applicable.

The Total Meal Service Days will be totaled and automatically roll up to the final Site Information Sheet.

- 6. If this site is a residential camp, please list camp schedule below:** This information is collected to ensure that DOE administrative reviews (if applicable) are scheduled when camp is in session.

**Site Type:** See explanation in # 2 on previous page.

- 7. Select appropriate eligibility data for this site:** Check only one category to describe the data used to document site eligibility.

**National School Lunch Data:** This data is used to qualify open sites located within a one-mile radius of the school from which data is obtained.

**Enrollment:** Enter the total number of children enrolled at the school.

**Eligible for Free and Reduced:** Enter the number of children eligible for both free and reduced price meals.

**School:** Enter the name of the school from which the data arises.

**\*\* The percent eligibility will be automatically calculated. The percentage should be 50% or over to qualify as eligible to operate an open site.**

**Census Tract Data:** This data is not as recent as the National School Lunch Data but will work if School Data is not available. Census tract data shows that the median family income in the area is equal to or less than the reduced price school lunch criteria.

**County/City:** Indicate the County and/or City for which the data pertains.

**%:** Indicates the number and percentage of children, ages 0-18 years, households with income below 185% of poverty.

**Census Tract #/Block Group #:** Indicate the Census Tract number and Block Group number for which the data pertains.

**Enrolled Sites:** All enrolled sites must establish the eligibility of the participating children using the Income Eligibility Application provided by the State Agency. Residential camps are reimbursed only for those meals served to children eligible for free and reduced price school meals.

**Enrollment:** Enter the total number of children enrolled at the site.

**Eligible for Free and Reduced:** Enter the number of children eligible for free and reduced price meals (according to the applications).

\*\*If the information is not available at the time of application, the State Agency will designate this site as “Pending” until the actual information is received. In the meantime, choose “Other Data” and explain that eligibility will be determined before the program begins.

**Other Data:** Choose this category if you will be using other appropriate data to document site eligibility (for example: local zoning data, housing authority information, economic surveys), or if you are waiting for the eligibility information (as described above in Enrolled Sites).

## 8. Meal Service

**Column (a) Type of Meal Served:** All meals are listed here. Complete only those you will be serving.

### **Column (b) Expected ADA (Average Daily Attendance):**

Project the average daily attendance (ADA) for each meal at every site. If the site was used in the SFSP before, actual attendance data from the previous year may be used. If the site was not used before, estimate the ADA.

To estimate the ADA, first estimate the maximum number of children you expect to serve at each meal for each site. Second, adjust this number downward. For programs with open sites, the ADA is usually about 2/3 of the maximum attendance. Enrolled programs and camps can expect smaller variations in their attendance. This adjusted number is the expected ADA.

**Column (c) Est. Number of Eligible:** This column is to be completed only by Residential Camp sponsors. **If you are not a Camp Sponsor, insert a “0” (zero) in this box.** For Residential Camp sponsors, estimate the number of Eligible Children to be served at the site based on the number from the year before.

**Columns (d) and (e): Time of Meal Service Begin/End:**

Indicate the starting and ending times for each type of meal. The meal service period is limited to two hours for Lunch and Supper and one hour for Breakfast and Snack. There must be three hours between the beginning of one meal service and the beginning of another.

**9. Method of Meal Preparation:**

**Self-preparation** - meals are prepared by the sponsoring organization itself.

**Vended** - the sponsoring organization is under contract with an outside organization to produce the meals for the SFSP.

**10. Was this a site last year?** Enter “Yes” or “No” accordingly.

**11./12. Name of person conducting the pre-operational site visit and date of visit:** Prior to approval of the application, sponsors must visit all new sites and any sites that had operational problems last year. These visits are to determine that the site has the facilities to provide meal service for the anticipated number of children and the capability to conduct the proposed meal service. These visits are NOT to be confused with the required site visits during the first week of program operation. Please see the SFSP Administrative Handbook for a sample form that can be used to record the visits made.

**13. Will the offer vs. serve option be used? (For Schools only):** This provision allows children at school sites to refuse certain meal components based on the school’s menu planning system.

**14. Is this site in a rural area?** Answer is “YES” unless the site is located in Portland.

**15. Will meal delivery be within one hour of meal service?** If meals are delivered to a satellite site away from the point where the meals are made, the meals must be at the site within one hour of meal service.

**16. Meals will be stored until the time of meal service:** Check the appropriate space or describe the procedure and equipment to be used.

**17. Any excess meals will be:** Check the appropriate space or describe the procedure and equipment to be used. Please refer to the SFSP Nutrition Handbook for guidance regarding the safe handling of food.

- 18. Is there shelter in case of inclement weather?:** Check “YES” if the site is protected from the elements and will not be affected by bad weather. Check “NO” if the opposite is the case. Meals do not have to be served if the weather prevents outdoor service.
- 19. Are there regularly scheduled organized activities at this site?** A planned function at a site that takes place before or after the SFSP meal service.
- 20. How will the site supervisor communicate with the sponsor to adjust the number of meals served?** Check the appropriate space or describe how the Site Supervisor will notify the sponsoring organization or kitchen of the number of meals required.
- 21. How will the meal service be supervised?** Provide a short description of the method of meal service and who is responsible for meal counts and ensuring each meal contains all the required components.
- 22. Give dates on which the following monitoring visits will be conducted:**
- a. First Week’s Monitor Visit:** To be conducted before the end of the first week of operation.
  - b. Second Monitor Review:** To be conducted before the end of the fourth week of site operation (by the 28<sup>th</sup> calendar day). The monitor must be at the site during the complete meal service at which time the ethnic (beneficiary data) count is taken as required by Federal regulations.

**Maine Department of Education  
Food Distribution Program  
Electronic Ordering Process  
for the Summer Food Service Program**

**APPLICATIONS MUST BE SUBMITTED and APPROVED BY APRIL 30, 2011.**

Commodities may be ordered after the State Agency has given Approval for the Application and the Agreement is “signed” by the Legal Agent.

1. Obtain I.D. and Password from Child Nutrition Services Office.
2. Log on to the web site <http://www.state.me.us/education/sfsr1.htm>
3. Click on File Forms School Officials Only.
4. Enter User I.D. and Password and click Submit.
5. On “Login Screen – Select System” click on School Food Service – Food Distribution.

**STEPS FOR PLACING A COMMODITY ORDER**

(Orders may be completed until the 15<sup>th</sup> of the month.)

1. On “Agency Main Page” click on the drop down box under “Select Program Name” and select Summer Food Service Program.
2. On “Agency Main Page” click **Shipping Addresses**.
3. Complete Shipping Addresses Form. You may have different addresses for delivery of dry, refrigerated or frozen items. If all items are delivered to the same place, complete the name and address of the delivery location and check the 3 radio buttons for dry, refrigerated and frozen.
4. Click **Submit** and return to “Agency Main Page”.
5. Click on **Monthly Orders**.
6. On “Monthly Orders Main Page” click on **File New Month Order**.
7. Enter your order (number of cases requested) and click on **View Totals**.
8. On “Month Order Preview Screen” click on **Accept** or **Return**. (Once order is accepted you can’t go back).
9. A “**Success**” message indicates your order has been processed.

**OTHER INFORMATION**

On “Monthly Orders Main Page” click on **Monthly Order List**. This is a list of orders. Please double check this list to make sure your order has been accepted.

On the “Agency Main Page” click on **Report List** to access various reports. The **Agency Report** shows a summary of your monthly delivery. The **Master File Report** shows the agency’s PAL, Year-to-Date PAL Accepted, Bonus Value Accepted, Total Value Received, Remaining PAL, Amount Refused.

**I.D. and PASSWORD REQUEST FORM**

Name of Sponsor: \_\_\_\_\_

Office Phone number: \_\_\_\_\_ Fax: \_\_\_\_\_

Complete the form below for those that submit forms electronically for the Summer Food Service Program. IDs and Passwords will be assigned based on this information. **Your ID and Password is considered a legal signature.** Passwords can and should be changed by each person after receiving their first one from DOE. If and when there are changes in the staff, you must notify the CNS office of the change in order to protect your data and to ensure the DOE has timely information for all sponsors.

1) Name of the Legal Agent for the sponsor: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

2) Name of Person preparing the Application: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

3) Name of Person preparing the Claim for Reimbursement:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

4) Name of Person ordering Commodities:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

5) Name of Person to Delete (if applicable): \_\_\_\_\_

**Return this information to Nanci Stitt-Kittredge by fax: 624-6841, or by regular mail:  
Child Nutrition Services, 23 State House Station, Augusta, ME 04333-0023 or by email:  
[nanci.kittredge@maine.gov](mailto:nanci.kittredge@maine.gov).**

**See reverse side for further definitions** 

### **Further Definitions**

- 1) The person completing the Application and the Site Information Sheets is able to fill out all of the information necessary for the program, however only the Legal Agent has the ability to approve the Application.
  
- 2) The Legal Agent is the person responsible for final approval of the Application, signing the Agreement between the state and sponsor, and approving any Claims filed for reimbursement. This person is the authority of an organization, for example, the Executive Director, President, Superintendent, or Chairperson.
  
- 3) The ID and Password for Commodities is used to order commodities and to complete other Food Distribution forms online.