SFSP Application & Agreement Process

mdek12.org

MISSISSIPPI DEPARTMENT OF EDUCATION

March 1, 2024

Introduction to MARS SFSP Application

MISSISSIPPI DEPARTMENT OF EDUCATION

MARS

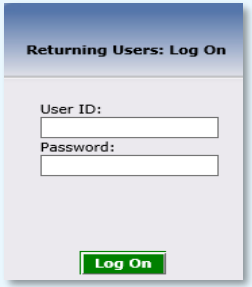
- Let’s look at the SFSP Application Module in MARS

Accessing the System

Enter the URL into your Web Browser

https://cnms.mdek12.org/prod/splash.aspx

Log on using your user ID and password



Click on the SFSP Module

MISSISSIPPI
DEPARTMENT OF
EDUCATION
Returning Users: Log On
User ID:
Password:
Log On
CNPXpress
Welcome to the Mississippi Production Site!
Hosted by CTS
Copyright © 2016 Colyar Technology Solutions

Summer Food Service Program
MISSISSIPPI DEPARTMENT OF EDUCATION
Applications
Claims
Compliance
Reports
My Account
Search
Programs
Year
Help
Log Out
Programs
School Nutrition Programs
Accounting
Child and Adult Care Food Program
Maintenance and Configuration
Summer Food Service Program

Make Sure you are in the Correct Program Year

Select Applications

Select Application Packet

Click Enroll

2015 - 2016 Application Packet

30018 Status: Active
EAST TENNESSEE HUMAN RESOURCE AGENCY
DBA: SUITE D-100 9111 CROSS PARK DRIVE GARY W. HOLLOWAY
No address on file for this year
Type of Agency: Government Agency
Type of SFSP Organization: Unit of Government

Packet Submitted Date:
Packet Approved Date:
Packet Original Approval Date:
Packet Status: Not Submitted

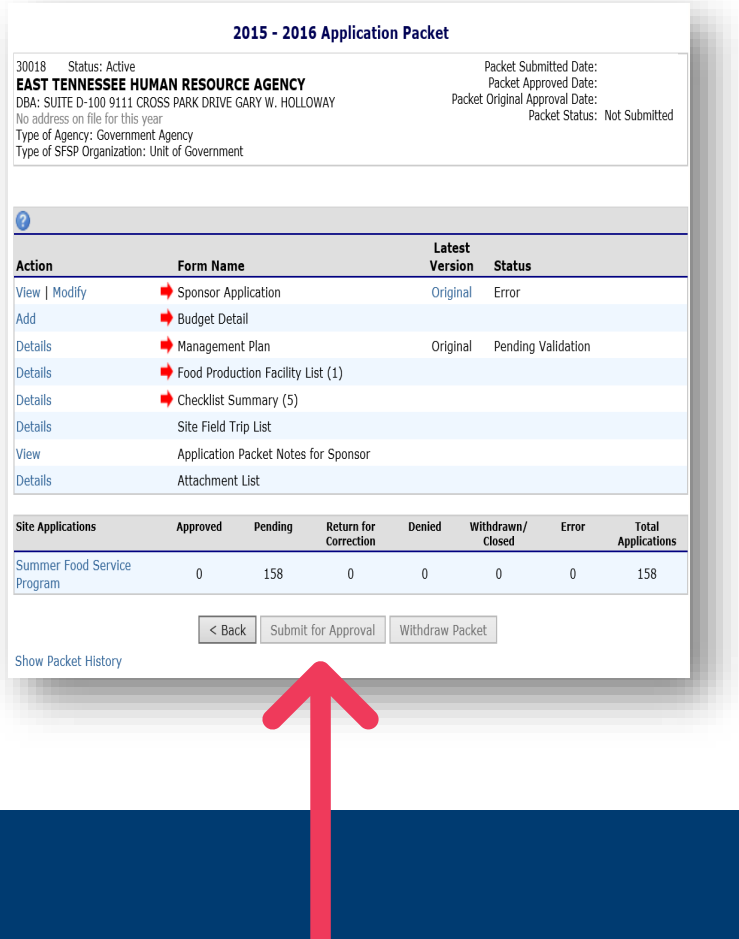
Action	Form Name	Latest Version	Status
View | Modify	Sponsor Application	Original	Error
Add	Budget Detail		
Details	Management Plan	Original	Pending Validation
Details	Food Production Facility List (1)		
Details	Checklist Summary (5)		
Details	Site Field Trip List		
View	Application Packet Notes for Sponsor		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	0	158	0	0	0	0	158

< Back | Submit for Approval | Withdraw Packet

Show Packet History

APP Packet Overview



2015 - 2016 Application Packet

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DBA: SUITE D-100 9111 CROSS PARK DRIVE GARY W. HOLLOWAY
No address on file for this year
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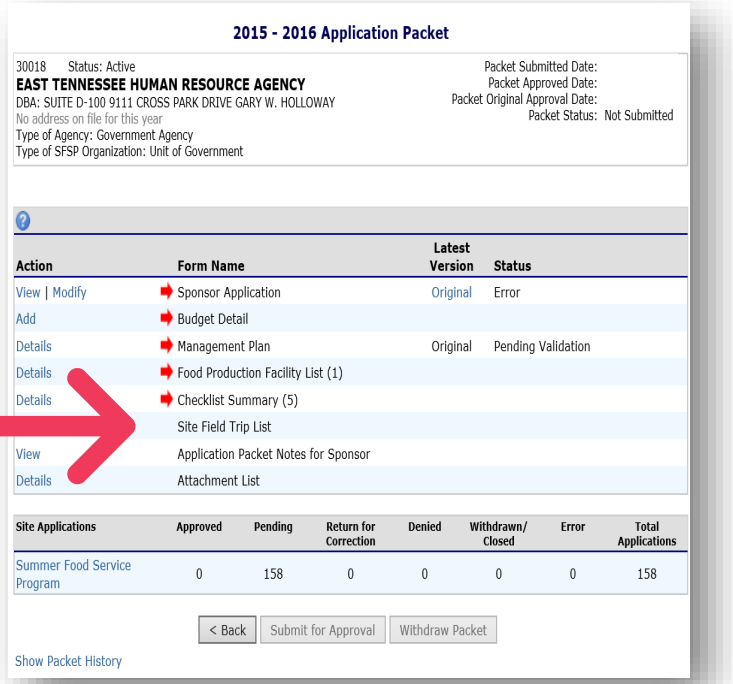
Summer Food Service Program	0	158	0	0	0	0	158

< Back | Submit for Approval | Withdraw Packet

Show Packet History

- This dashboard contains a series of forms necessary for SFSP enrollment
- The “Submit for Approval” button is enabled **ONLY** when all required forms have been completed correctly

Field Trips



- The Site Field Trip Section **CANNOT** be completed until after your application has been approved by the SA.

Order of Completion

Wondering what to do first? It makes a really big difference, actually!

Why Does Order Even Matter?

Data from preceding forms populate to the succeeding form. For example:

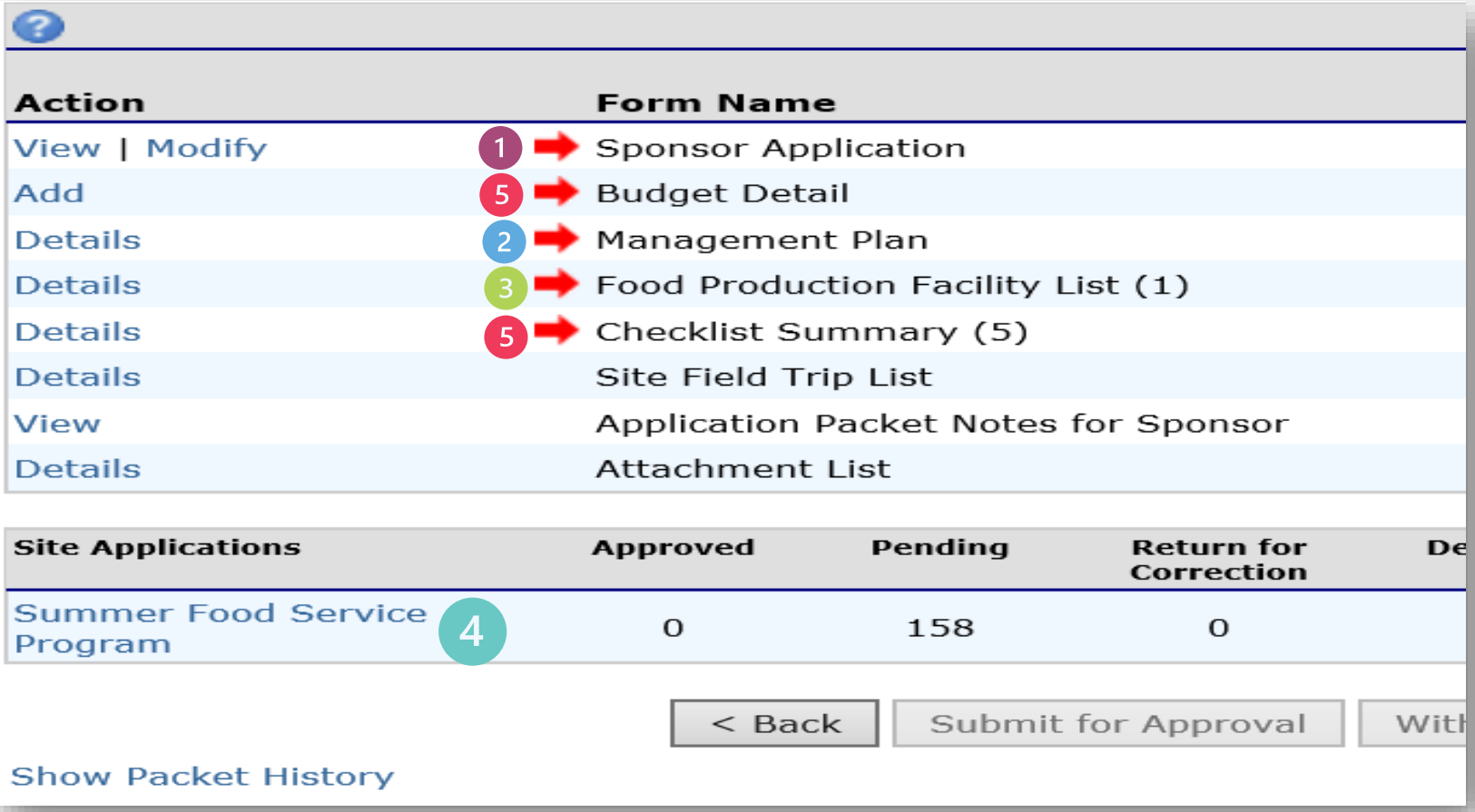
- **Food Production Facilities** (A Central Kitchen or Vendor) pre-populate on the Site Application forms
- The **Budget** is based on the number of operating days and ADP from the Site Application Forms. MARS will essentially calculate your anticipated reimbursement, and you need that figure to build your budget.
- **Checklist** items are attachments to be submitted with the application and are determined based on answers provided in the application packet.

In a nutshell: The Food Production Facilities must be completed BEFORE the site applications, and the Budget and Checklist Summary must be completed AFTER the site applications.

Correct Order to Complete Forms

1. **Organization Application**
2. **Management Plan**
3. **Food Production Facility *(if applicable)***

   this only applies to sponsors with FSMC or Satellite Sites.
4. **Site Applications**
5. **Budget** and **Checklist Summary**



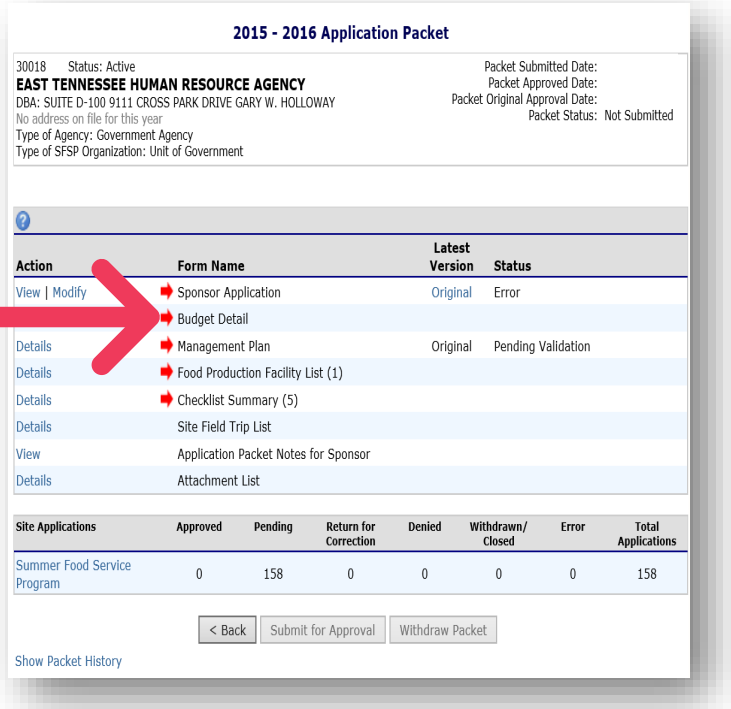
Action		Form Name
View | Modify	1	Sponsor Application
Add	5	Budget Detail
Details	2	Management Plan
Details	3	Food Production Facility List (1)
Details	5	Checklist Summary (5)
Details		Site Field Trip List
View		Application Packet Notes for Sponsor
Details		Attachment List

Site Applications		Approved	Pending	Return for Correction	De
Summer Food Service Program	4	0	158	0	

< Back | Submit for Approval | Witl

Show Packet History

Take Note!



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Summer Food Service Program	0	158	0	0	0	0	158

< Back | Submit for Approval | Withdraw Packet

Show Packet History

MARS can be very confusing, because you may think you need to complete your budget after you do your sponsor/ organization application…

WRONG!

Your Budget should be one of the last things you do!

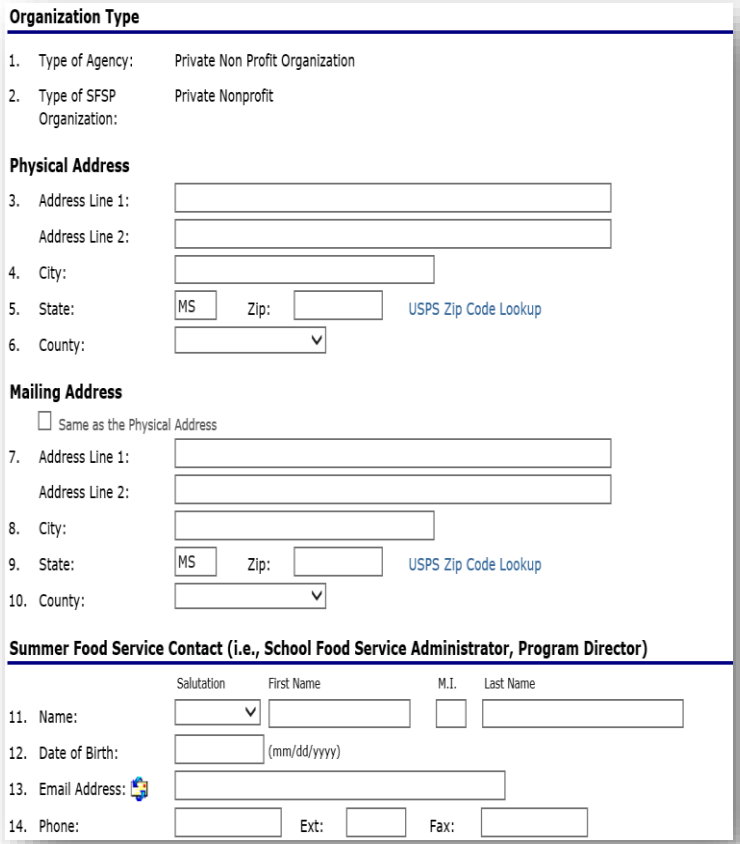
Organization Application

Step 1

Contains Basic Info Regarding Sponsor

Action	Form Name	Latest Version	Status
Modify	✔ Organization Application	Rev. 1	Submitted
View | Revise	✔ Budget Detail	Original	Approved
Details	✔ Management Plan	Rev. 1	Approved
Details	✔ Food Production Facility List (2)		
Details	✔ Checklist Summary (3)		
Details	Site Field Trip List (7)		
View	Application Packet Notes for Organization (2)		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	1	7	0	0	0	0	8



Organization Type

1. Type of Agency: Private Non Profit Organization
2. Type of SFSP Organization: Private Nonprofit

Physical Address

3. Address Line 1:
   Address Line 2:
4. City:
5. State: MS Zip: USPS Zip Code Lookup
6. County:

Mailing Address

☐ Same as the Physical Address

7. Address Line 1:
   Address Line 2:
8. City:
9. State: MS Zip: USPS Zip Code Lookup
10. County:

Summer Food Service Contact (i.e., School Food Service Administrator, Program Director)

	Salutation	First Name	M.I.	Last Name
11. Name:				

12. Date of Birth: (mm/dd/yyyy)
13. Email Address:
14. Phone: Ext: Fax:

Organization Application

- Some of the information may have pre-populated from last year's application
- Review and correct this data
- Enter all other fields

Read and Check the Certification

Certification

50. ☑ I hereby certify that neither the Organization nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

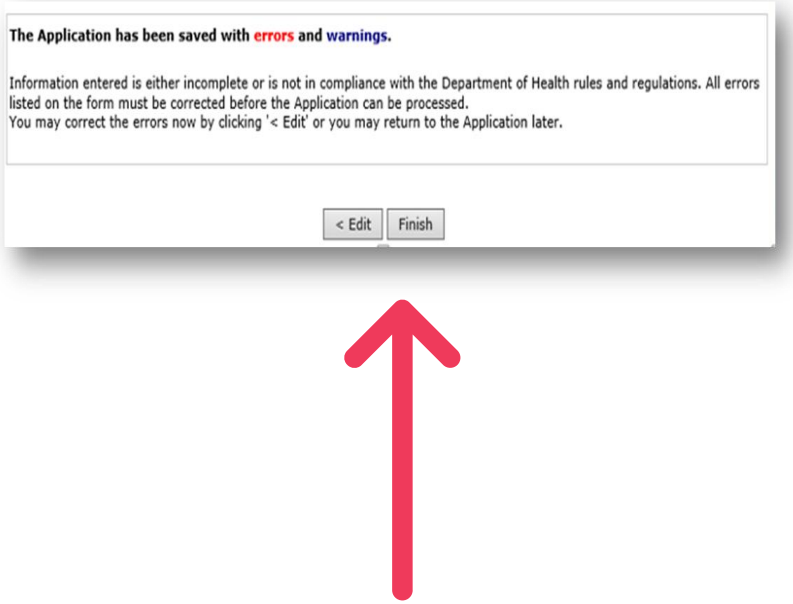
I certify under penalty of perjury that the information on these application forms is true and correct, and that I will immediately report to the state agency any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of federal funds. The state agency may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable federal and state criminal statutes.

On behalf of the Organization, I hereby agree to comply with all state and federal laws and regulations governing the Child Nutrition Programs administered by the state agency. In accordance with Federal law and U.S. Department of Agriculture policy, this Organization does not discriminate on the basis of race, color, national origin, sex, age or disability. I will ensure that all monthly claims for reimbursement are true and correct and that records are available to support these claims.

Created By: YBacon1 on: 3/7/2016 11:34:53 AM Modified By: YBacon1 on: 3/7/2016 11:34:53 AM

Save Cancel

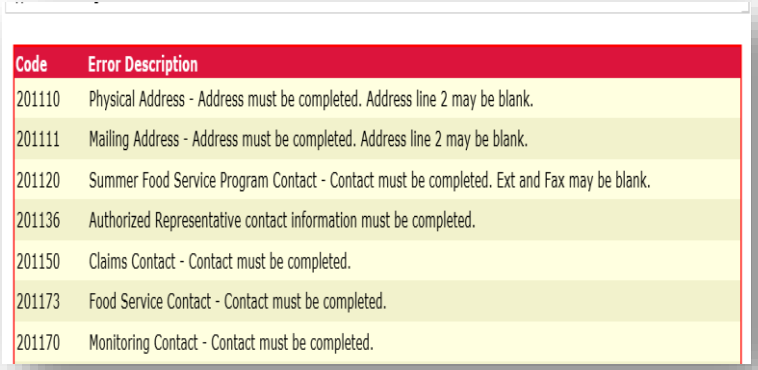
Error Messages



If errors exist, the system will display an error message.

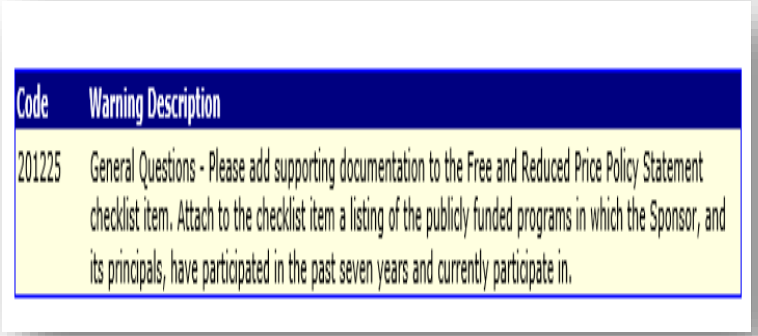
You can correct the errors now (by clicking Edit) or return later (by clicking Finish).

Error Messages



Code	Error Description
201110	Physical Address - Address must be completed. Address line 2 may be blank.
201111	Mailing Address - Address must be completed. Address line 2 may be blank.
201120	Summer Food Service Program Contact - Contact must be completed. Ext and Fax may be blank.
201136	Authorized Representative contact information must be completed.
201150	Claims Contact - Contact must be completed.
201173	Food Service Contact - Contact must be completed.
201170	Monitoring Contact - Contact must be completed.

Errors in red must be fixed to submit the app



Code	Warning Description
201225	General Questions - Please add supporting documentation to the Free and Reduced Price Policy Statement checklist item. Attach to the checklist item a listing of the publicly funded programs in which the Sponsor, and its principals, have participated in the past seven years and currently participate in.

Warnings in Blue are informational – you can submit your app with warnings

Management Plan

Step 2

Click on “Details” for Management Plan

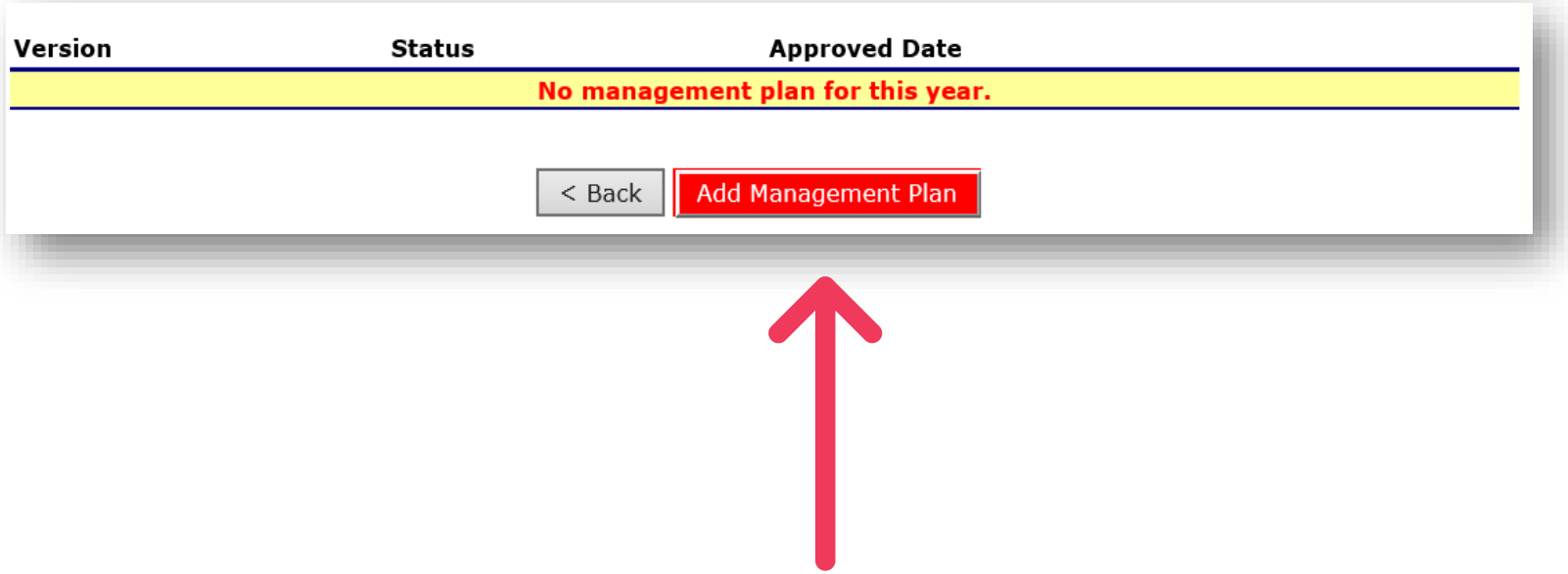
Action	Form Name	Latest Version	Status
View | Modify	✔ Organization Application	Rev. 1	Submitted
View | Revise	✔ Budget Detail	Original	Approved
Details	Management Plan	Rev. 2	Pending Validation
Details	✔ Food Production Facility List (2)		
Details	✔ Checklist Summary (3)		
Details	Site Field Trip List (7)		
View	Application Packet Notes for Organization (2)		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	1	7	0	0	0	0	8

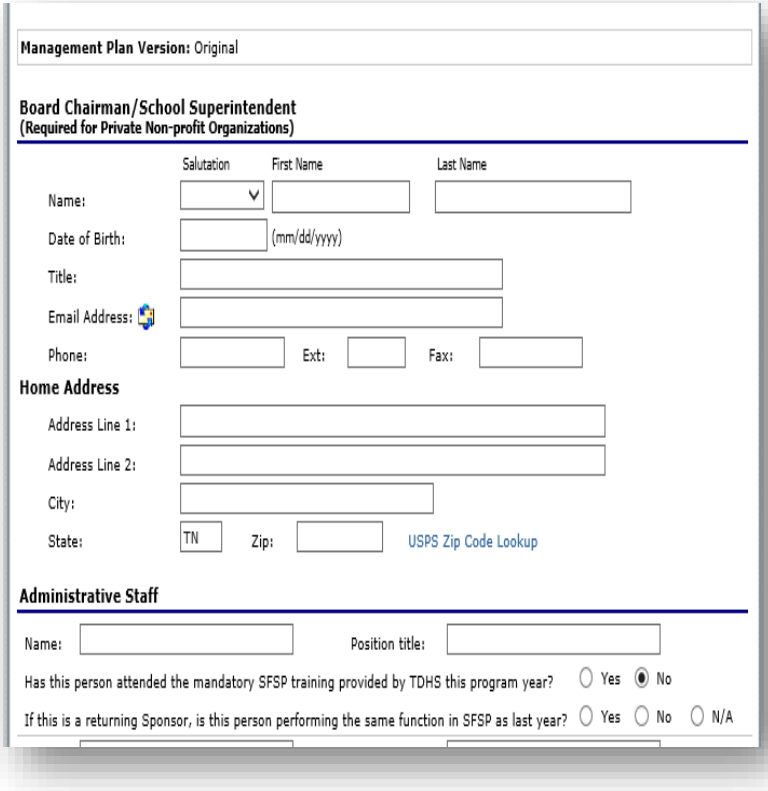
< Back | Submit for Approval

Show Packet History

Click “Add Management Plan”



Management Plan



Management Plan Version: Original

Board Chairman/School Superintendent
(Required for Private Non-profit Organizations)

Salutation | First Name | Last Name

Name:

Date of Birth: (mm/dd/yyyy)

Title:

Email Address:

Phone: Ext: Fax:

Home Address

Address Line 1:

Address Line 2:

City:

State: TN Zip: USPS Zip Code Lookup

Administrative Staff

Name: Position title:

Has this person attended the mandatory SFSP training provided by TDHS this program year? Yes No

If this is a returning Sponsor, is this person performing the same function in SFSP as last year? Yes No N/A

- On this form you will indicate the number of staff that you have by type, and when they were trained on required topics
- When completed, click the Save button. Correct errors if any exist

Food Production Facilities

Step 3 – IF APPLICABLE!!!!

Many organizations make the mistake of completing this form when it is NOT applicable to them.

Which Orgs Need to Complete it?

- FSMCs
- Orgs that have any Satellite Sites and food is produced in a central kitchen (this would be the food production facility).

Which Orgs SHOULD NOT Complete it?

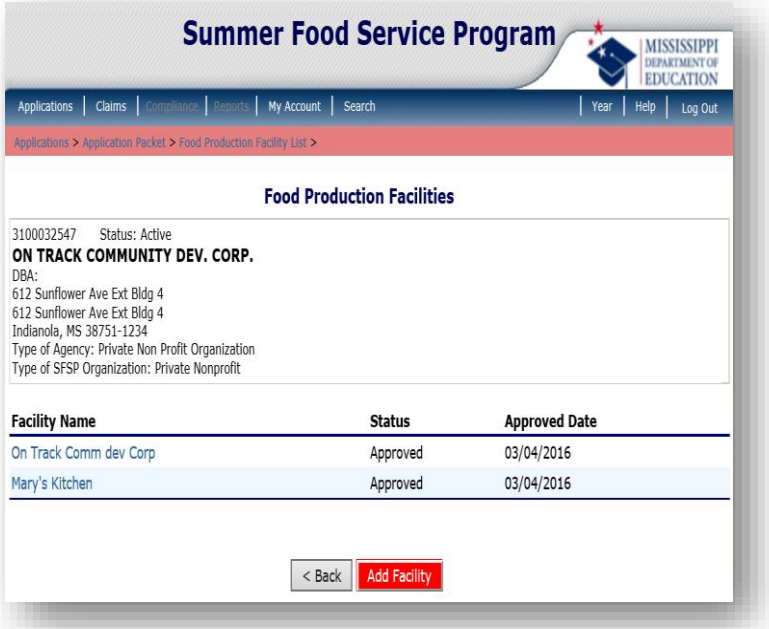
IF ALL YOUR SITES ARE **SELF PREP SITES** AND YOU DO NOT HAVE A FSMC, YOU DO NOT NEED TO COMPLETE THE FOOD PRODUCTION FACILITY SECTION!

Click “Details” to add a Food Production Facility

Action	Form Name	Latest Version	Status
View | Modify	✔ Organization Application	Rev. 1	Submitted
View | Revise	✔ Budget Detail	Original	Approved
Details	✔ Management Plan	Rev. 1	Approved
Details	✔ Food Production Facility List (2)		
Details	✔ Checklist Summary (3)		
Details	Site Field Trip List (7)		
View	Application Packet Notes for Organization (2)		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	1	7	0	0	0	0	8

Add Facilities



- To complete a Food Production Facility form, click the “Add Facility” button
- Must identify all food preparation facilities that will be used by any of your Satellite sites
- Add as many as you need until they are all listed.

Food Production Facility Information

1. Food Preparation Type: Central Kitchen
2. Facility Name: Mary's Kitchen

Facility Address

3. Address Line 1: 820 Hillside Street
   Address Line 2: 820 Hillside
4. City: Midnight
5. State: MS Zip: 39115-0123 USPS Zip Code Lookup

Facility Contact

6. Name: Salutation: Honorable; First Name: Mary Ella; Last Name: Williams
7. Email Address: mawilliams@yahoo.com
8. Phone: (662) 987-6543 Ext: 234 Fax: (664) 235-6789
9. Title: Superwoman

Vended Facility Information

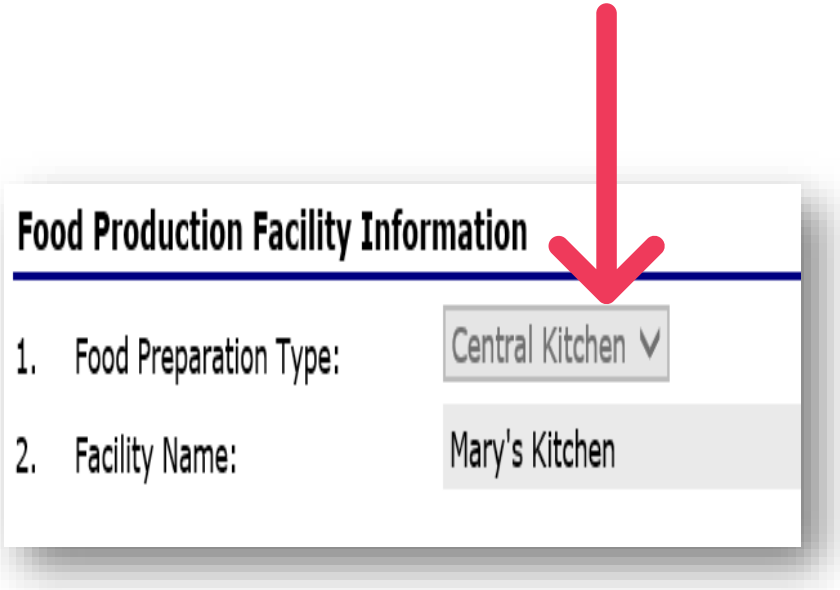
10. If vended by a School Food Authority (SFA) or another SFSP Organization, enter SFA/Organization name. If vended by an entity other than an SFA or another SFSP Organization, enter the entity's name.

11. If meals will be vended, indicate whether the Organization is using MDE-provided contract (Two-page agreement), approved alternate form or is exempt from competitive bidding and will use a simple written agreement.

- ○ I will be using the State's Contract Template (2-page agreement)
- ○ I am exempt from competitive bidding and will use a simple written agreement
- ○ I have received state approval to use an alternate form

12. Is the Organization extending the Food Service Management Company (FSMC) contract for which it went out for bid?

Facility Type



For Question #1 :

- If Prepared on-site, select **Central Kitchen**
- If Received from a Vendor, select **Vended**

- When completed, click the save button
- Correct errors if any exist

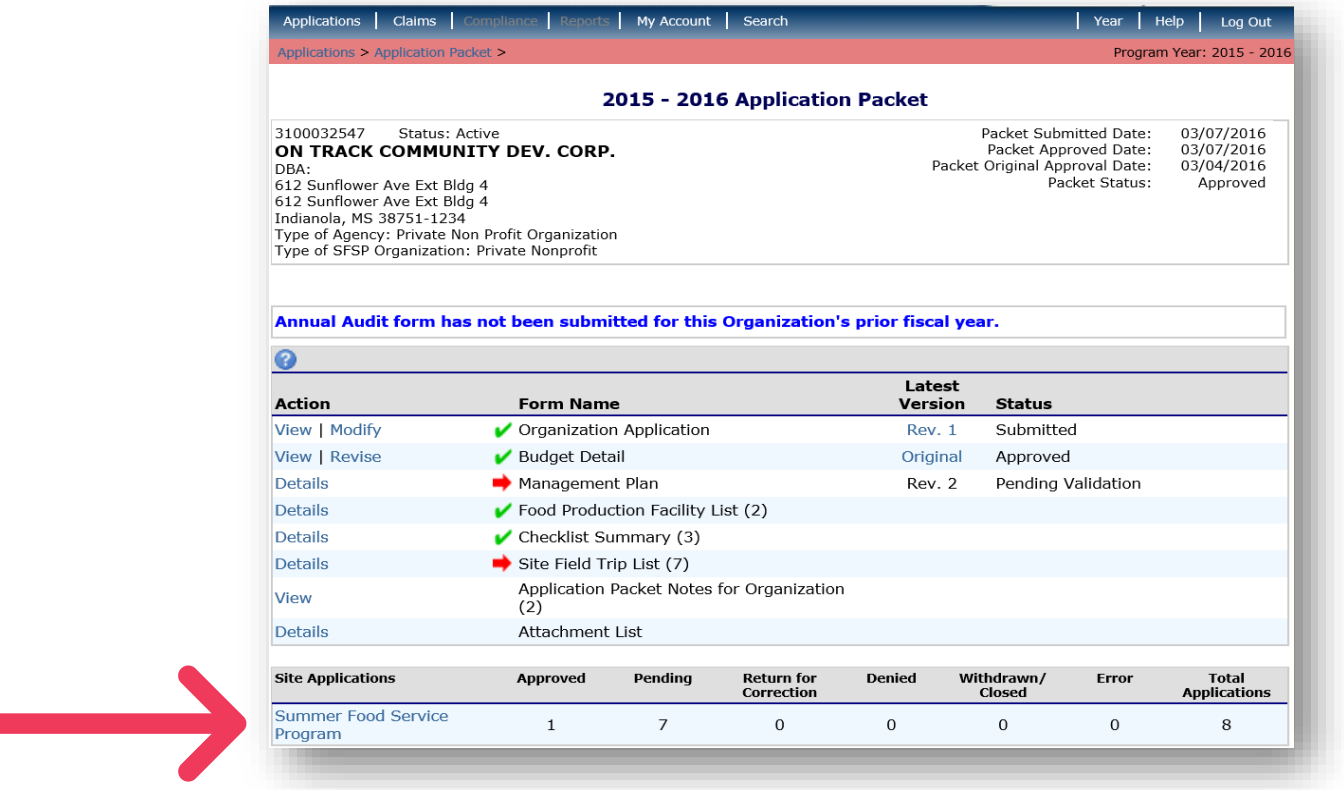
Things to Remember

- Multiple facilities can be added
- Once facilities are entered, they will display as selection options on the Site Application Forms
- Food Production Facilities must be entered prior to completing the Site Applications

Site Applications

Step 4 – Complete a Site Application for every site that will be operating

Click Link to See Your Site List



Applications | Claims | Compliance | Reports | My Account | Search | Year | Help | Log Out

Applications > Application Packet > Program Year: 2015 - 2016

2015 - 2016 Application Packet

3100032547 Status: Active
ON TRACK COMMUNITY DEV. CORP.
DBA:
612 Sunflower Ave Ext Bldg 4
612 Sunflower Ave Ext Bldg 4
Indianola, MS 38751-1234
Type of Agency: Private Non Profit Organization
Type of SFSP Organization: Private Nonprofit

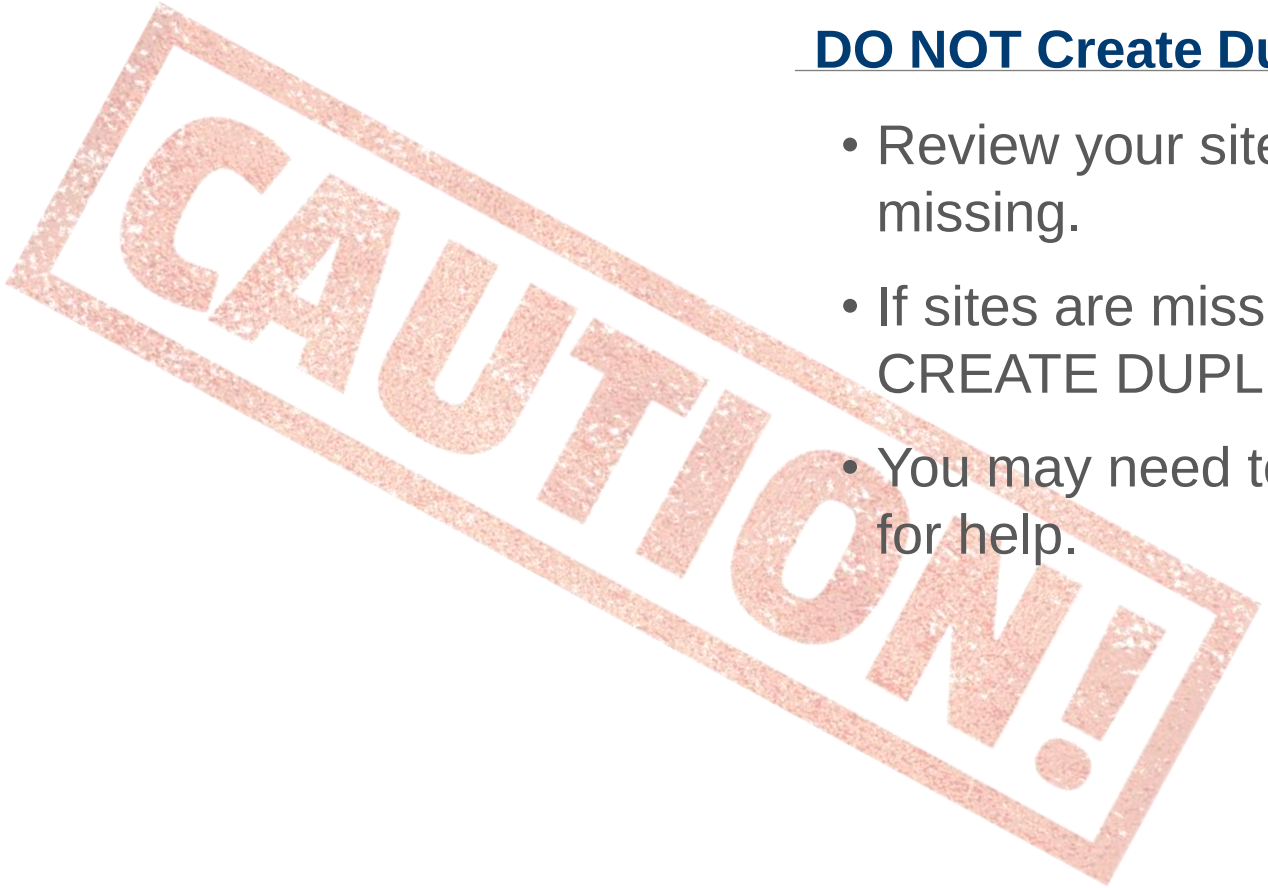
Packet Submitted Date: 03/07/2016
Packet Approved Date: 03/07/2016
Packet Original Approval Date: 03/04/2016
Packet Status: Approved

Annual Audit form has not been submitted for this Organization's prior fiscal year.

Action	Form Name	Latest Version	Status
View | Modify	Organization Application	Rev. 1	Submitted
View | Revise	Budget Detail	Original	Approved
Details	Management Plan	Rev. 2	Pending Validation
Details	Food Production Facility List (2)		
Details	Checklist Summary (3)		
Details	Site Field Trip List (7)		
View	Application Packet Notes for Organization (2)		
Details	Attachment List		

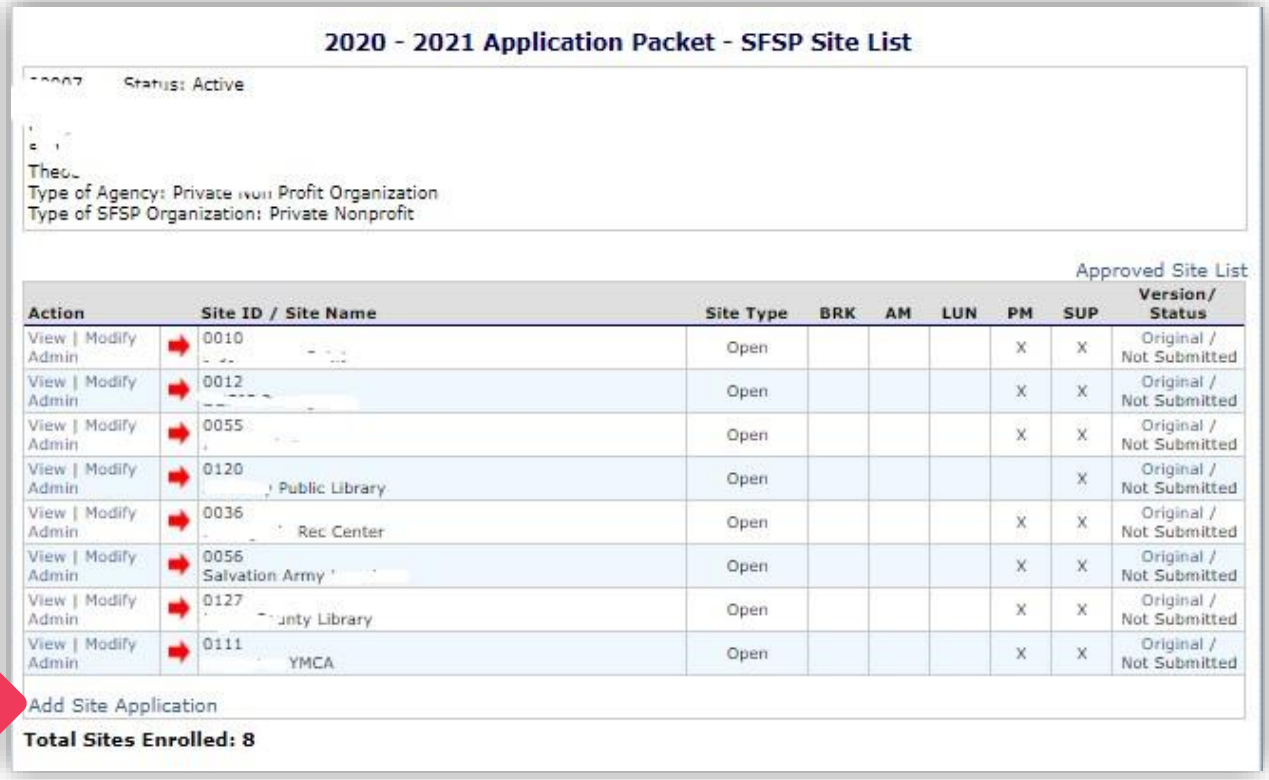
Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	1	7	0	0	0	0	8

DO NOT Create Duplicate Sites!



- Review your site list to see if any missing.
- If sites are missing, DO NOT CREATE DUPLICATES!
- You may need to contact your PS for help.

Check Site List



2020 - 2021 Application Packet - SFSP Site List

Status: Active

Type of Agency: Private Non Profit Organization
Type of SFSP Organization: Private Nonprofit

Approved Site List

Action	Site ID / Site Name	Site Type	BRK	AM	LUN	PM	SUP	Version / Status
View | Modify Admin	0010	Open				X	X	Original / Not Submitted
View | Modify Admin	0012	Open				X	X	Original / Not Submitted
View | Modify Admin	0055	Open				X	X	Original / Not Submitted
View | Modify Admin	0120 Public Library	Open					X	Original / Not Submitted
View | Modify Admin	0036 Rec Center	Open				X	X	Original / Not Submitted
View | Modify Admin	0056 Salvation Army	Open				X	X	Original / Not Submitted
View | Modify Admin	0127 unty Library	Open				X	X	Original / Not Submitted
View | Modify Admin	0111 YMCA	Open				X	X	Original / Not Submitted

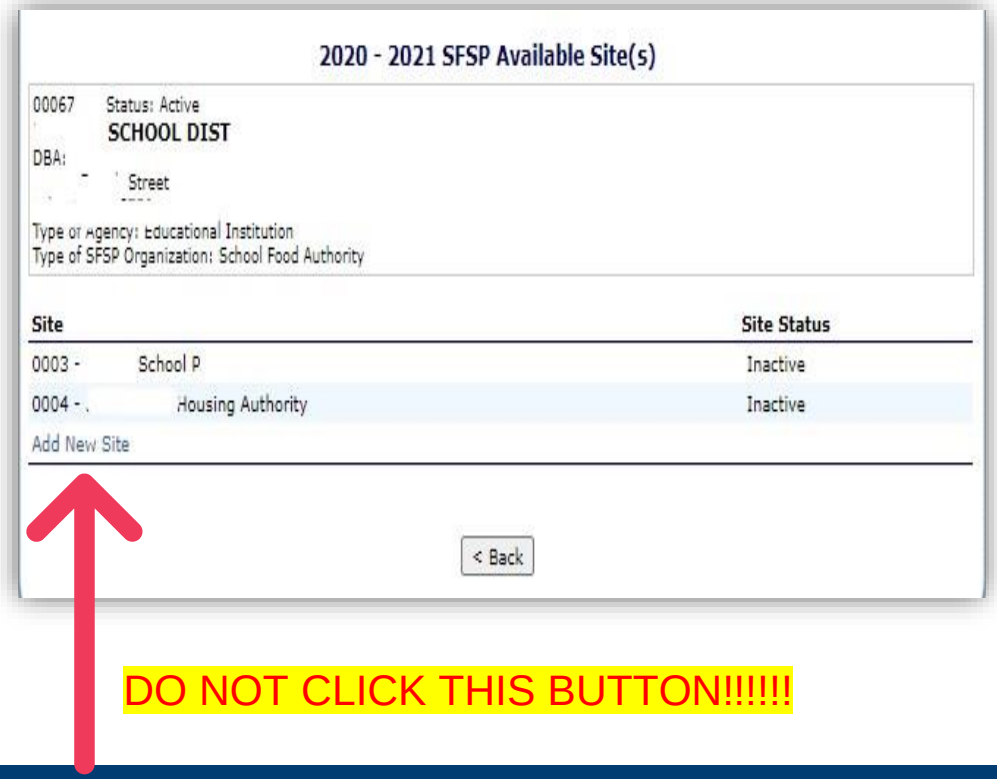
Add Site Application

Total Sites Enrolled: 8

The system lists the approved sites from last year

Check to see if any sites are missing, if sites are missing, click “add site application” at the bottom

Searching for Lost Sites



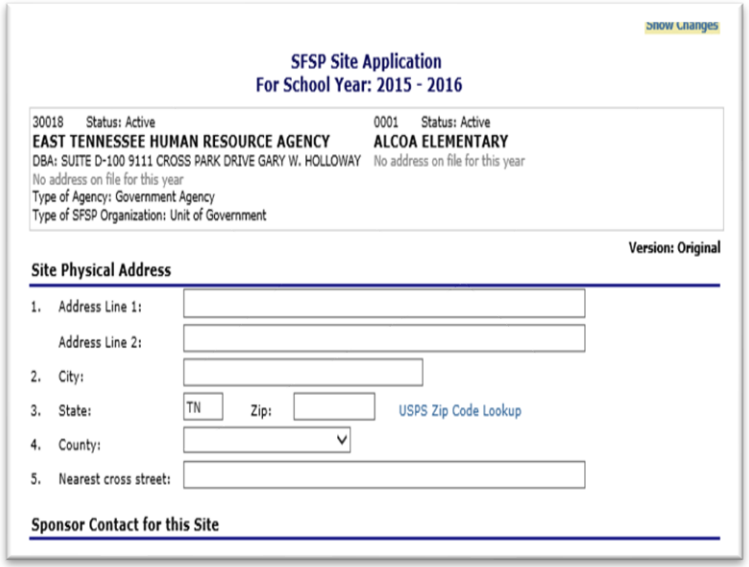
You will be redirected to a page with a list of additional sites. If you see the missing site, you can click to add it to your application. **If you DON'T see the missing site, you need to contact your PS**. We can add your missing sites.

You should NEVER manually type in site information. If you get to that point, contact your PS.

Modify Site Information

- Once we have all our sites listed, we can start to edit the information for the current PY.
- Click the **Modify** link next to a site to start the application

Site Application


Show Changes

SFSP Site Application
For School Year: 2015 - 2016

30018 Status: Active
EAST TENNESSEE HUMAN RESOURCE AGENCY
DBA: SUITE D-100 9111 CROSS PARK DRIVE GARY W. HOLLOWAY
No address on file for this year
Type of Agency: Government Agency
Type of SFSP Organization: Unit of Government

0001 Status: Active
ALCOA ELEMENTARY
No address on file for this year

Version: Original

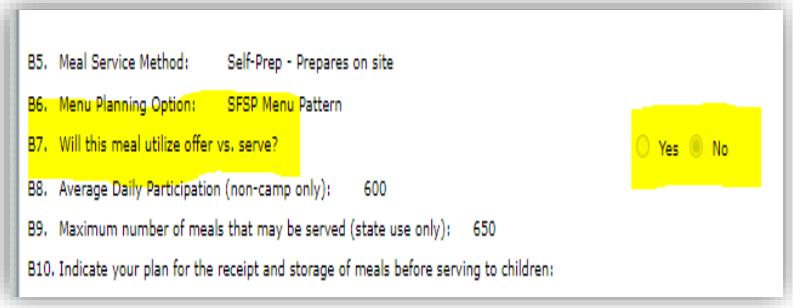
Site Physical Address

1. Address Line 1:
Address Line 2:
2. City:
3. State: TN Zip: USPS Zip Code Lookup
4. County:
5. Nearest cross street:

Sponsor Contact for this Site

- Address information will pre-populate from last year's application
- Review and correct this data, and enter all other fields

OVS Question B7/L7


B5. Meal Service Method: Self-Prep - Prepares on site

B6. Menu Planning Option: SFSP Menu Pattern

B7. Will this meal utilize offer vs. serve? ○ Yes ◉ No

B8. Average Daily Participation (non-camp only): 600

B9. Maximum number of meals that may be served (state use only): 650

B10. Indicate your plan for the receipt and storage of meals before serving to children:

- Questions B7 & L7
- If you plan to implement OVS at your site, you MUST indicate this in your application

Breakfast

B1. Meal Serving Dates (non-camp only): ☑ Same as the Site Start: 06/17/2016 End: 07/19/2016

B2. Enter the number of days the meal will be served each month: ☑ Same as the Site

OCT 2015	NOV 2015	DEC 2015	JAN 2016	FEB 2016	MAR 2016	APR 2016	MAY 2016	JUN 2016	JUL 2016	AUG 2016	SEP 2016
0	0	0	0	0	0	0	0	10	14	0	0

B3. Days served: ☐ Mon-Fri ☐ Sun ☑ Mon ☑ Tue ☑ Wed ☑ Thu ☑ Fri ☐ Sat

B4. Meal Times: Start: 7 AM :00 End: 7 AM :20

B5. Meal Service Method: Satellite Site - Receives meals (Central Kitchen)

B6. Menu Planning Option: SFSP Menu Pattern

B7. Average Daily Participation (non-camp only): 20

B8. Maximum number of meals that may be served (state use only):

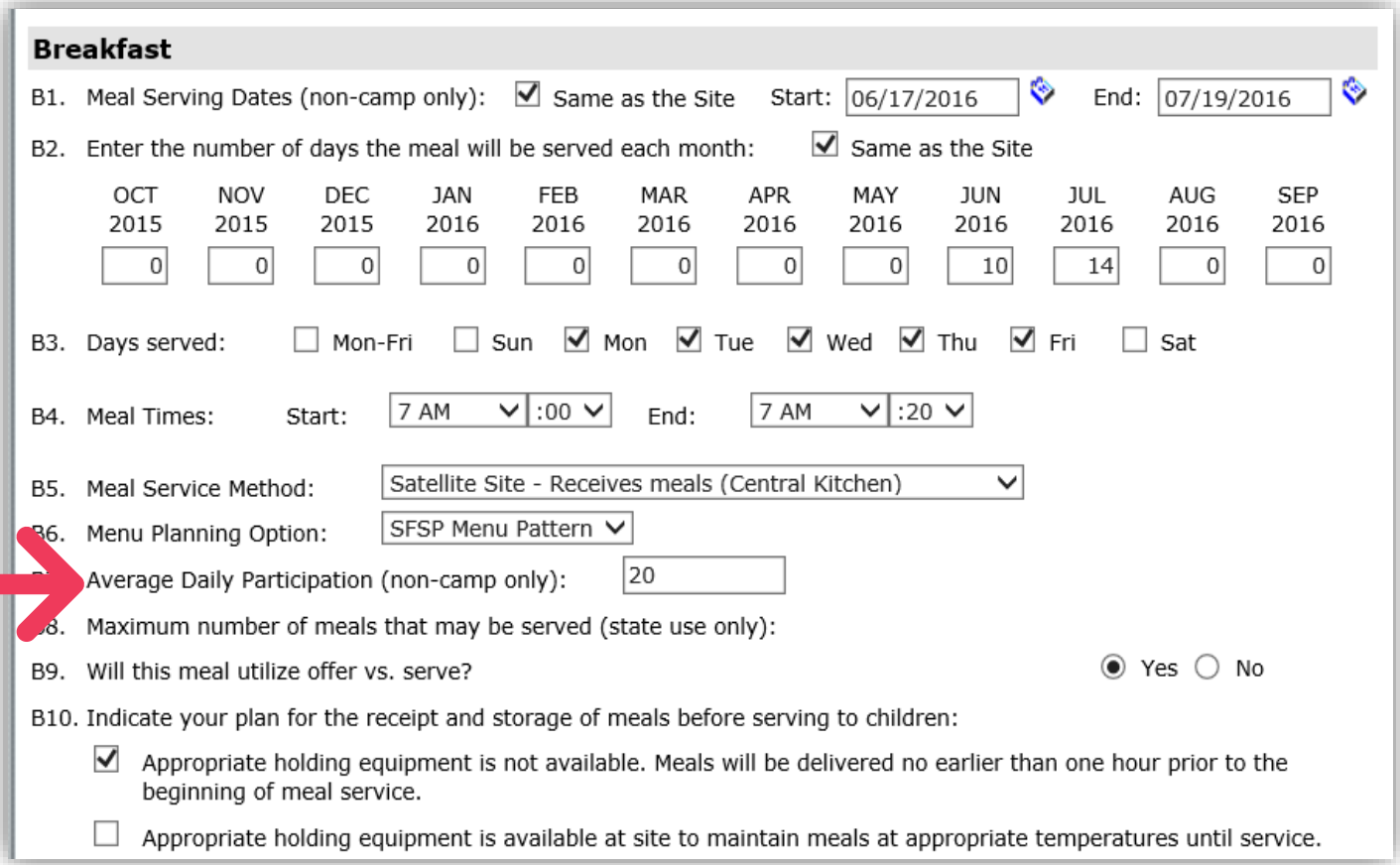
B9. Will this meal utilize offer vs. serve? ◉ Yes ○ No

B10. Indicate your plan for the receipt and storage of meals before serving to children:

☑ Appropriate holding equipment is not available. Meals will be delivered no earlier than one hour prior to the beginning of meal service.

☐ Appropriate holding equipment is available at site to maintain meals at appropriate temperatures until service.

Number of days entered affect anticipated Budget reimbursement amounts and when a claim can be submitted



Breakfast

B1. Meal Serving Dates (non-camp only): ☑ Same as the Site Start: 06/17/2016 End: 07/19/2016

B2. Enter the number of days the meal will be served each month: ☑ Same as the Site

OCT 2015	NOV 2015	DEC 2015	JAN 2016	FEB 2016	MAR 2016	APR 2016	MAY 2016	JUN 2016	JUL 2016	AUG 2016	SEP 2016
0	0	0	0	0	0	0	0	10	14	0	0

B3. Days served: ☐ Mon-Fri ☐ Sun ☑ Mon ☑ Tue ☑ Wed ☑ Thu ☑ Fri ☐ Sat

B4. Meal Times: Start: 7 AM :00 End: 7 AM :20

B5. Meal Service Method: Satellite Site - Receives meals (Central Kitchen)

B6. Menu Planning Option: SFSP Menu Pattern

Average Daily Participation (non-camp only): 20

B8. Maximum number of meals that may be served (state use only):

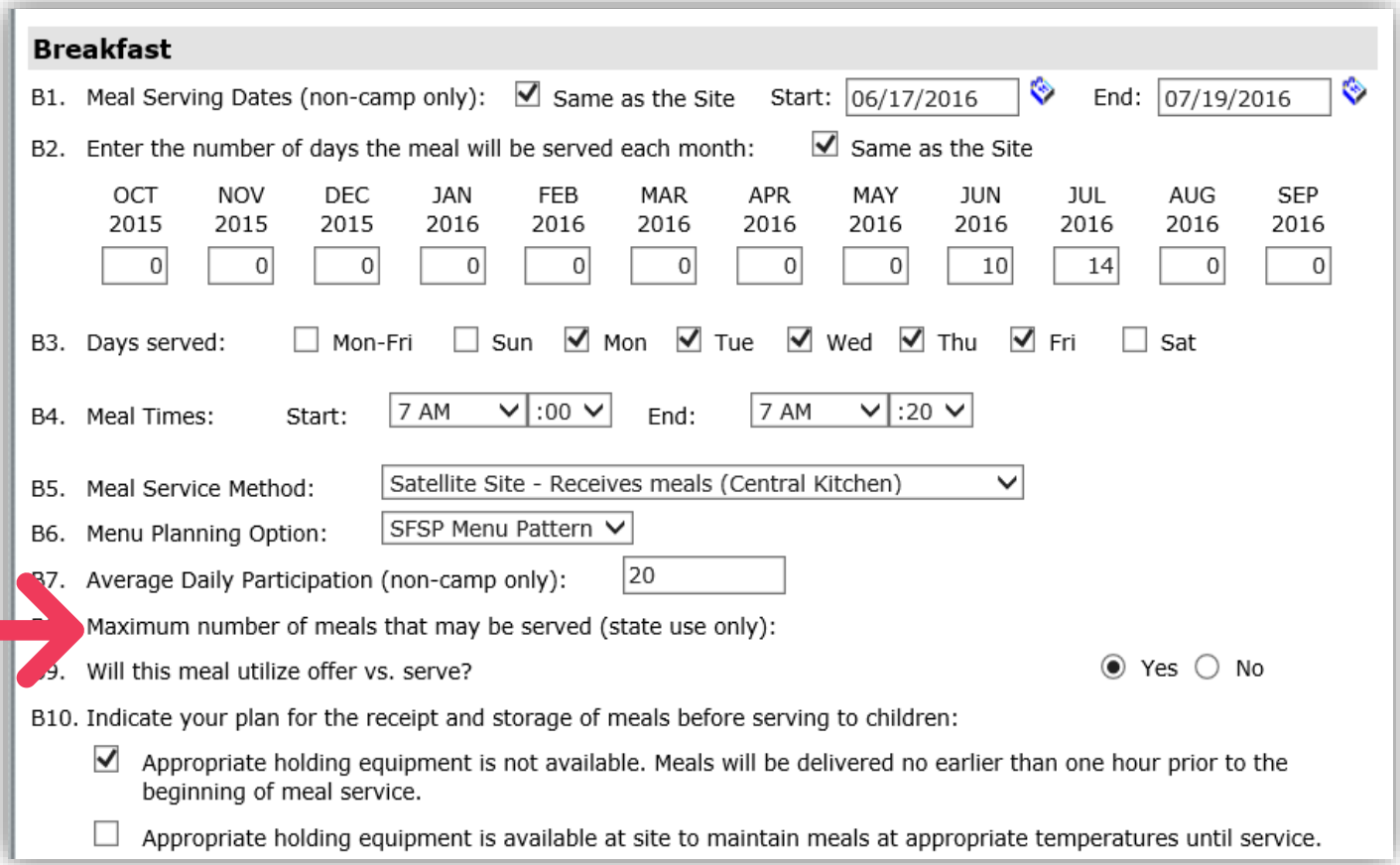
B9. Will this meal utilize offer vs. serve? ◉ Yes ○ No

B10. Indicate your plan for the receipt and storage of meals before serving to children:

☑ Appropriate holding equipment is not available. Meals will be delivered no earlier than one hour prior to the beginning of meal service.

☐ Appropriate holding equipment is available at site to maintain meals at appropriate temperatures until service.

Average Daily Participation (ADP) affects anticipated Budget reimbursement amounts and claim edits



Breakfast

B1. Meal Serving Dates (non-camp only): ☑ Same as the Site Start: 06/17/2016 End: 07/19/2016

B2. Enter the number of days the meal will be served each month: ☑ Same as the Site

OCT 2015	NOV 2015	DEC 2015	JAN 2016	FEB 2016	MAR 2016	APR 2016	MAY 2016	JUN 2016	JUL 2016	AUG 2016	SEP 2016
0	0	0	0	0	0	0	0	10	14	0	0

B3. Days served: ☐ Mon-Fri ☐ Sun ☑ Mon ☑ Tue ☑ Wed ☑ Thu ☑ Fri ☐ Sat

B4. Meal Times: Start: 7 AM :00 End: 7 AM :20

B5. Meal Service Method: Satellite Site - Receives meals (Central Kitchen)

B6. Menu Planning Option: SFSP Menu Pattern

B7. Average Daily Participation (non-camp only): 20

Maximum number of meals that may be served (state use only):

B9. Will this meal utilize offer vs. serve? ◉ Yes ○ No

B10. Indicate your plan for the receipt and storage of meals before serving to children:

☑ Appropriate holding equipment is not available. Meals will be delivered no earlier than one hour prior to the beginning of meal service.

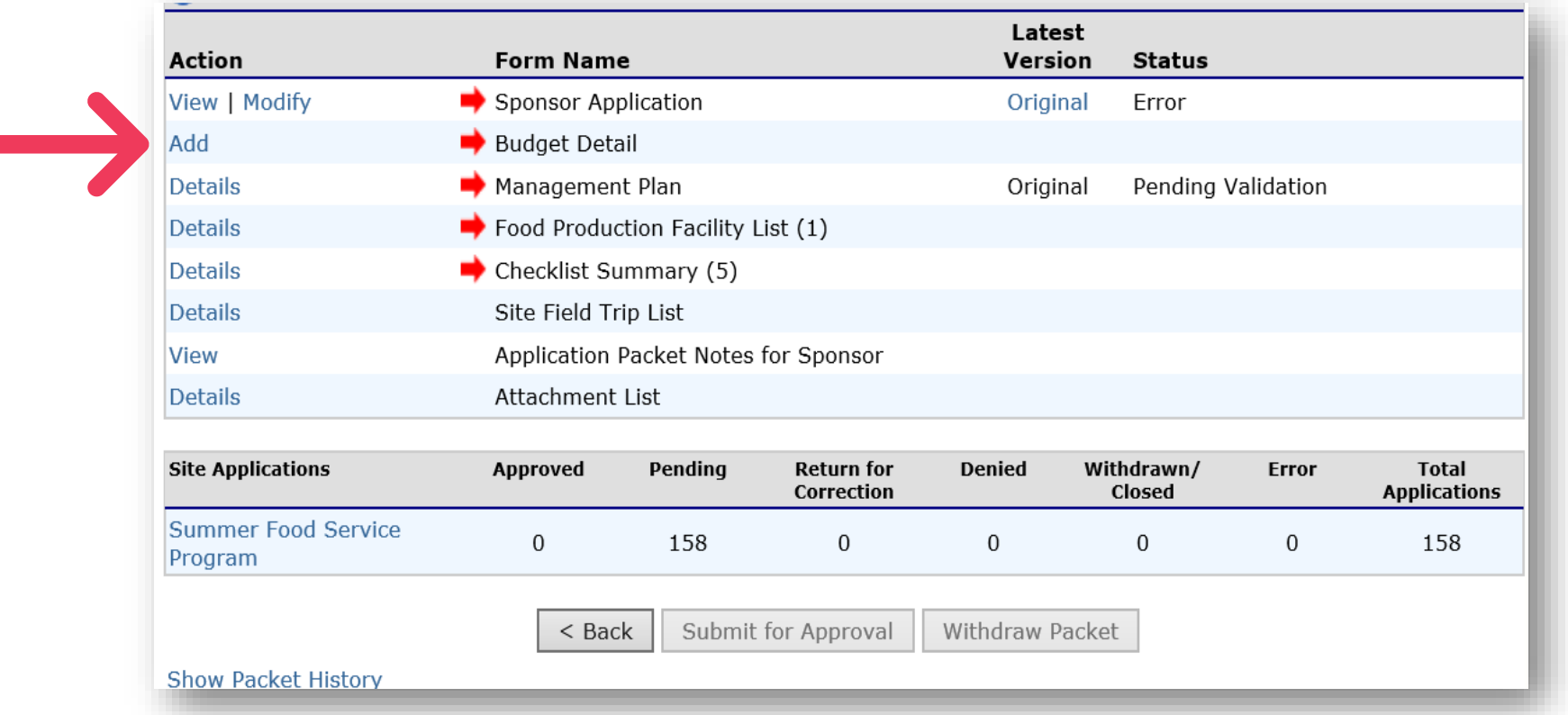
☐ Appropriate holding equipment is available at site to maintain meals at appropriate temperatures until service.

Maximum number of meals approved by the State is used as an edit on the claim

Budget

Step 5.1

Click “Add” to begin Budget



Action	Form Name	Latest Version	Status
View | Modify	Sponsor Application	Original	Error
Add	Budget Detail		
Details	Management Plan	Original	Pending Validation
Details	Food Production Facility List (1)		
Details	Checklist Summary (5)		
Details	Site Field Trip List		
View	Application Packet Notes for Sponsor		
Details	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	0	158	0	0	0	0	158

< Back | Submit for Approval | Withdraw Packet

Show Packet History

Budgets Must be completed after all Site Application Forms are completed.

MARS will calculate anticipated reimbursement based on Site Application information;

You will only be required to provide your anticipated expenses.

You Will Enter Nothing Here! It's Pre-populated!

Operating Reimbursement

Meal	Sites	Total Meals	Total
Breakfast	2	149,100	$322,056.00
Lunch	2	149,100	$560,616.00
Snack	0	0	$0.00
Supper	0	0	$0.00
		Sub Total	$882,672.00

Administrative Reimbursement

Meal	Sites	Total Meals	Total
Breakfast	2	149,100	$32,056.50
Lunch	2	149,100	$58,521.75
Snack	0	0	$0.00
Supper	0	0	$0.00
		Sub Total	$90,578.25

Enter Projected Budget for Costs

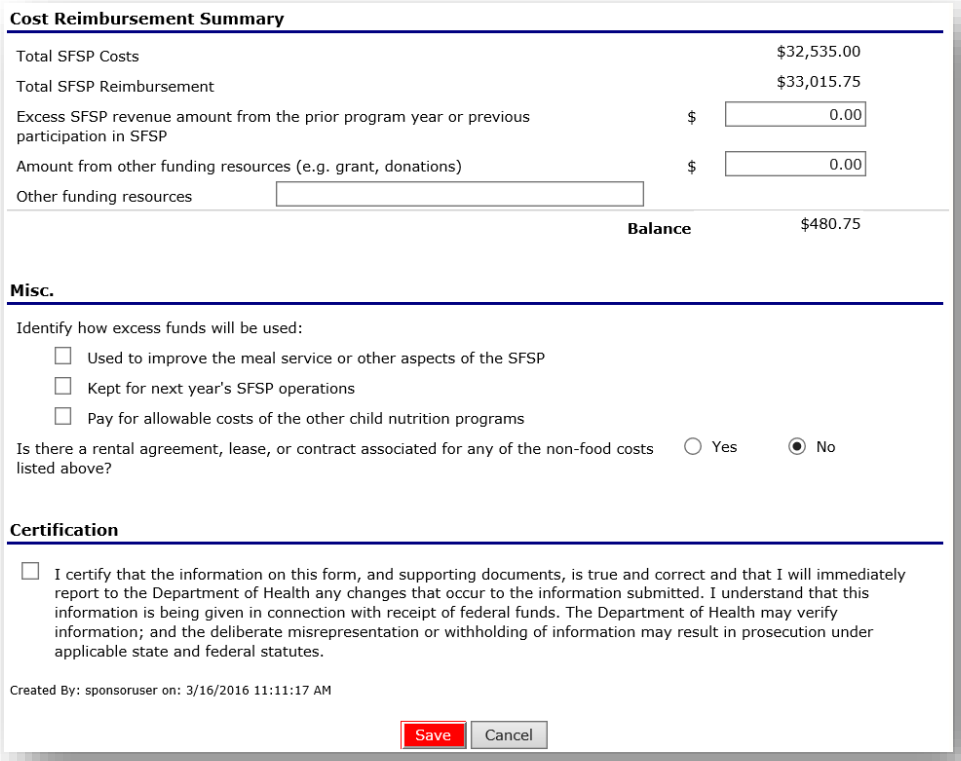
Projected Operating Costs

Total Labor Costs (Salaries, Wages, Taxes and Benefits)		$	14,000.00
Total Food Expenses		$	15,000.00
Facilities and Space (Educational Facilities only)		$	0.00
Supplies		$	500.00
Rental Equipment		$	0.00
Purchased Services		$	0.00
Media Costs		$	35.00
Contracting Organization Cost		$	0.00
Other		$	0.00
Indirect Cost	10.00 %	$	0.00
	Total Operating Costs		$29,535.00

Projected Administrative Costs

Total Labor Costs (Salaries, Wages, Taxes and Benefits)		$	3,000.00
Facilities and Space		$	0.00
Supplies		$	0.00
Rental Equipment		$	0.00
Purchased Services		$	0.00
Financial Costs		$	0.00
Media Costs		$	0.00
Contracting Organization Cost		$	0.00
Other		$	0.00
Indirect Cost	0.00 %	$	0.00
	Total Administrative Costs		$3,000.00

Other Funding Sources



Cost Reimbursement Summary

Total SFSP Costs		$32,535.00
Total SFSP Reimbursement		$33,015.75
Excess SFSP revenue amount from the prior program year or previous participation in SFSP	$	0.00
Amount from other funding resources (e.g. grant, donations)	$	0.00
Other funding resources		
Balance		$480.75

Misc.

Identify how excess funds will be used:

- ☐ Used to improve the meal service or other aspects of the SFSP
- ☐ Kept for next year's SFSP operations
- ☐ Pay for allowable costs of the other child nutrition programs

Is there a rental agreement, lease, or contract associated for any of the non-food costs listed above? ○ Yes ◉ No

Certification

☐ I certify that the information on this form, and supporting documents, is true and correct and that I will immediately report to the Department of Health any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of federal funds. The Department of Health may verify information; and the deliberate misrepresentation or withholding of information may result in prosecution under applicable state and federal statutes.

Created By: sponsoruser on: 3/16/2016 11:11:17 AM

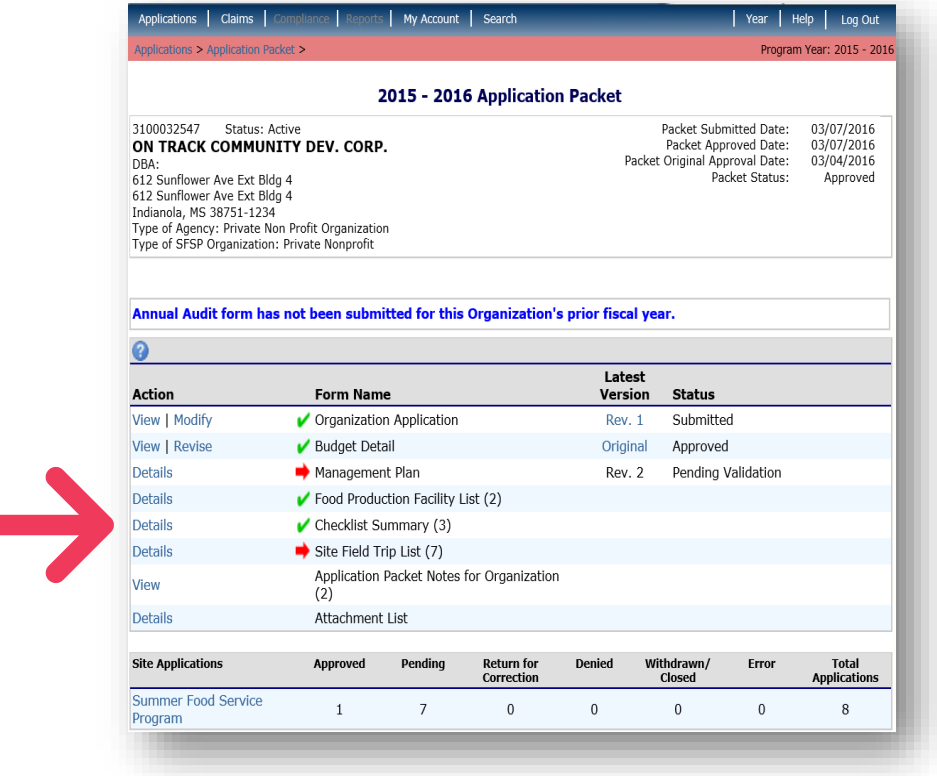
Save Cancel

- Enter any amounts from other funding resources
- Answer questions on miscellaneous funding
- When completed, click the save button
- Correct errors if any exist

Checklist Summary

Step 5.2

Upload Checklist Documents



- Based on answers within the application, the system will identify if supplemental information must be submitted with the packet
- Click the “Details” link to view your list of required documents to attach to the application

System will tell you what documents you need to attach

Required Forms/Documents to send to MDE		Document Submitted to MDE	Date Submitted to MDE	Document on File w/MDE	Status	Status Date	Last Updated By
Board Minutes		☑	03/01/2016	☑	Approved	03/04/2016	YBacon1
Copy of FSMC Contract(s)		☑	03/01/2016	☑	Approved	03/04/2016	YBacon1

Action	Checklist Item	Comment	Attachment Date/Time
View | Modify	Copy of FSMC Contract(s)		3/4/2016 6:48:13 AM

Note!

- Failing to complete the checklist summary is a common reason why Orgs are unable to submit their applications
- Remember, the system will NOT let you submit the application if it is not complete.
- If you cannot submit, check the Checklist Summary first, then call your PS to troubleshoot.

Submission

Final Step

Conduct a Visual Check!

Forms requiring completion and/or contain errors display a red arrow.

Forms that are completed and error-free display a green checkmark

“Submit for Approval” only Enabled When All Forms Complete

View | Modify	✔ Budget Detail	Rev. 1	Pending Approval	
Details	✔ Management Plan	Rev. 1	Pending Approval	
Details	Food Production Facility List			
Details	Site Field Trip List			
Details	✔ Checklist Summary (5)			
View	Application Packet Notes for Sponsor			
Details	Attachment List			

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	0	28	0	0	0	0	28

< Back | Submit for Approval

Packet Status Change to “Submitted for Approval”

2015 - 2016 Application Packet

3100032547 Status: Active
ON TRACK COMMUNITY DEV. CORP.
DBA:
612 Sunflower Ave Ext Bldg 4
612 Sunflower Ave Ext Bldg 4
Indianola, MS 38751-1234
Type of Agency: Private Non Profit Organization
Type of SFSP Organization: Private Nonprofit

Packet Submitted Date: 03/16/2016
Packet Approved Date:
Packet Original Approval Date: 03/04/2016
Packet Status: Submitted for Approval

Annual Audit form has not been submitted for this Organization's prior fiscal year.

Action	Form Name	Latest Version	Status
View	✔ Organization Application	Rev. 1	Submitted
View	✔ Budget Detail	Rev. 1	Pending Approval
Details	✔ Management Plan	Rev. 2	Pending Approval
Details	✔ Food Production Facility List (2)		
Details	✔ Checklist Summary (3)		

Forms are Now View Only, Pending SA Review

SA Review

Final Steps

- The **SA will review** the Sponsor's submission; during this time, the Application Packet is view-only to the organization
- The SA will either **approve the entire packet or return** some/all packet components to the Organization for additional work
- An **email is sent** by the system to the Organization's SFSP Program Contact when the packet is Returned, Approved, or Denied by the State
- The SA will enter comments viewable at the top of the application packet item screen **requesting data correction or additional** information

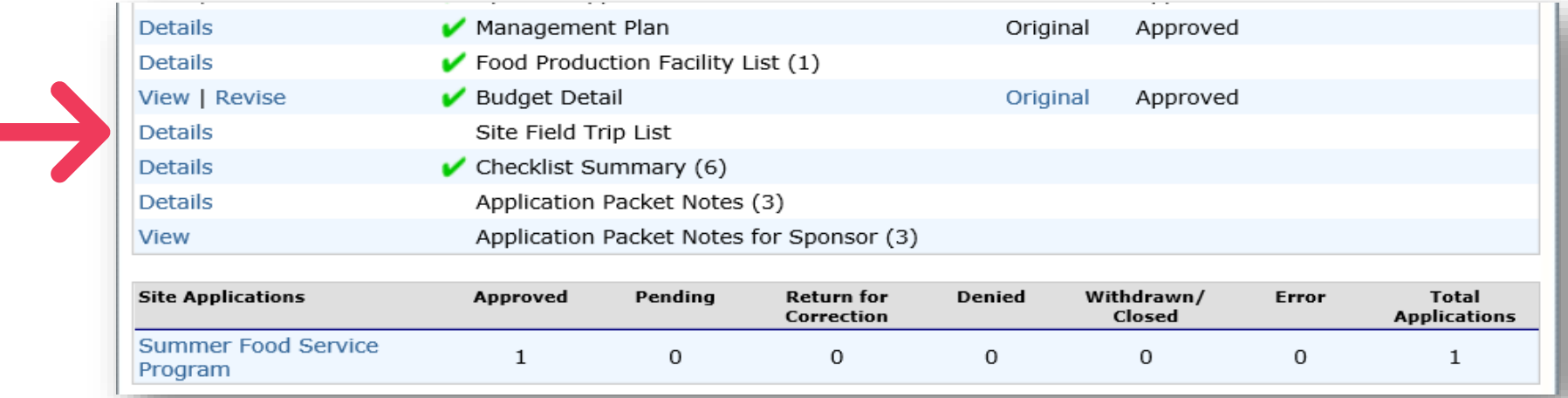
Field Trips

If you serve off site, it **MUST** have SA approval

- **Prior Rule:** defines site as physical location at which sponsor provides food service for children.
- **New Rule:** Allows Sponsors to claim meals away from an approved site ***IF AND ONLY IF*** certain conditions are met – chief among these is prior SA approval.

Field Trips can *only* be added after Packet is approved by the SA.

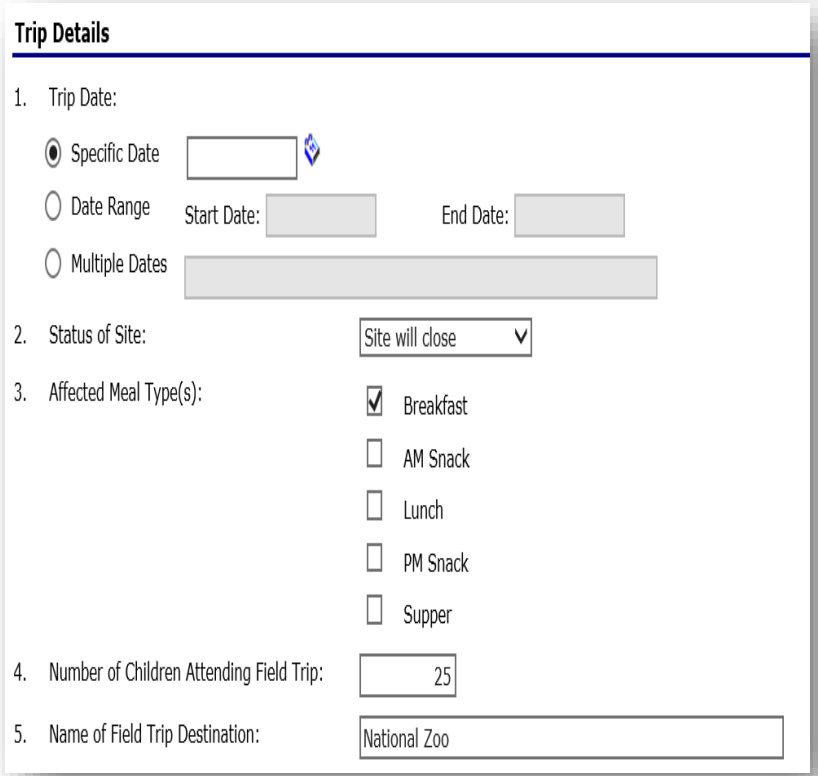
Click “Details” then “Create New Field Trip”



Details	✔	Management Plan	Original	Approved
Details	✔	Food Production Facility List (1)		
View | Revise	✔	Budget Detail	Original	Approved
Details		Site Field Trip List		
Details	✔	Checklist Summary (6)		
Details		Application Packet Notes (3)		
View		Application Packet Notes for Sponsor (3)		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
Summer Food Service Program	1	0	0	0	0	0	1

Field Trip Form



- When completed, click the "Save" button.
- Correct errors if any exist

NEW Requirements

Additional Information Required during Application

Part of your Application process this year will be VCA

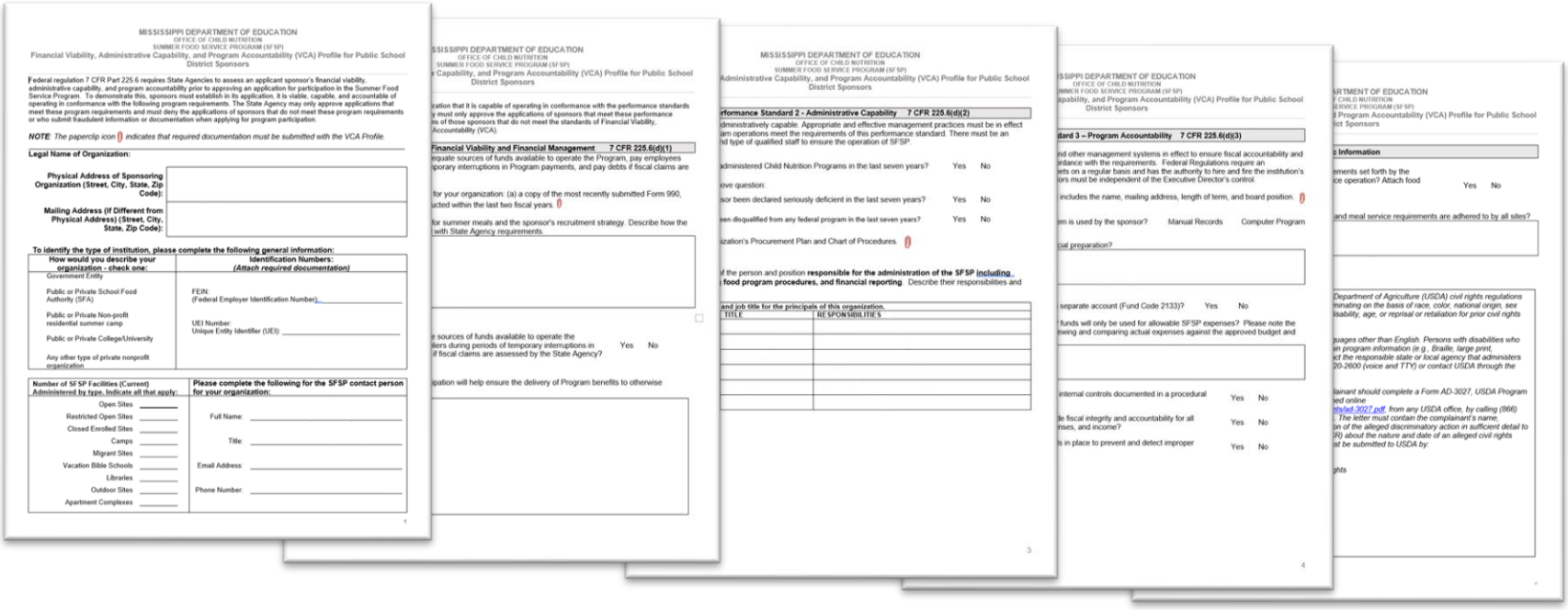
Viability, Capability, Accountability

- **New Rule:** Sponsors must submit a management plan to demonstrate compliance with performance standards (VCA)
  - New sponsor and those with significant operational problems must submit a complete management plan
  - Experienced sponsors submit a full or simplified plan(at discretion of SA). Full plans must submit once every three years.
  - SFAs in good standing may be exempt from submitting plans discretion of SA.

VCA Plan

You MUST submit a VCA plan, otherwise your SFSP application will not be approved

New Form! Must be completed and uploaded in MARS!



MISSISSIPPI DEPARTMENT OF EDUCATION
OFFICE OF CHILD NUTRITION
SUMMER FOOD SERVICE PROGRAM (SFSP)
Financial Viability, Administrative Capability, and Program Accountability (VCA) Profile for Public School District Sponsors

Federal regulation 7 CFR Part 225.6 requires State Agencies to assess an applicant sponsor's financial viability, administrative capability, and program accountability prior to approving an application for participation in the Summer Food Service Program. To demonstrate this, sponsors must establish in its application, it is viable, capable, and accountable of operating in conformance with the following program requirements. The State Agency may only approve applications that meet these program requirements and must deny the applications of sponsors that do not meet these program requirements or who submit fraudulent information or documentation when applying for program participation.

NOTE: The paperclip icon indicates that required documentation must be submitted with the VCA Profile.

Legal Name of Organization:

Physical Address of Sponsoring Organization (Street, City, State, Zip Code):

Mailing Address (If Different from Physical Address) (Street, City, State, Zip Code):

To identify the type of institution, please complete the following general information:

How would you describe your organization - check one:	Identification Numbers: *(Attach required documentation)*
Government Entity	
Public or Private School Food Authority (SFA)	FEIN: (Federal Employer Identification Number):
Public or Private Non-profit residential summer camp	
Public or Private College/University	UEI Number: Unique Entity Identifier (UEI):
Any other type of private nonprofit organization	

Number of SFSP Facilities (Current) Administered by type. Indicate all that apply:	Please complete the following for the SFSP contact person for your organization:
Open Sites	Full Name:
Restricted Open Sites	Title:
Closed Enrolled Sites	Email Address:
Camps	Phone Number:
Migrant Sites	
Vacation Bible Schools	
Libraries	
Outdoor Sites	
Apartment Complexes	

MISSISSIPPI DEPARTMENT OF EDUCATION
OFFICE OF CHILD NUTRITION
SUMMER FOOD SERVICE PROGRAM (SFSP)
Administrative Capability, and Program Accountability (VCA) Profile for Public School District Sponsors

Performance Standard 2 - Administrative Capability 7 CFR 225.6(d)(2)

administratively capable. Appropriate and effective management practices must be in effect operations meet the requirements of this performance standard. There must be an type of qualified staff to ensure the operation of SFSP.

administered Child Nutrition Programs in the last seven years? Yes No

ove question:

sor been declared seriously deficient in the last seven years? Yes No

en disqualified from any federal program in the last seven years? Yes No

ization's Procurement Plan and Chart of Procedures.

f the person and position **responsible for the administration of the SFSP including food program procedures, and financial reporting**. Describe their responsibilities and

and job title for the principals of this organization.

TITLE	RESPONSIBILITIES

MISSISSIPPI DEPARTMENT OF EDUCATION
OFFICE OF CHILD NUTRITION
SUMMER FOOD SERVICE PROGRAM (SFSP)
Capability, and Program Accountability (VCA) Profile for Public School District Sponsors

Standard 3 – Program Accountability 7 CFR 225.6(d)(3)

nd other management systems in effect to ensure fiscal accountability and dance with the requirements. Federal Regulations require an ets on a regular basis and has the authority to hire and fire the institution's ors must be independent of the Executive Director's control.

includes the name, mailing address, length of term, and board position.

em is used by the sponsor? Manual Records Computer Program

cial preparation?

separate account (Fund Code 2133)? Yes No

funds will only be used for allowable SFSP expenses? Please note the ewing and comparing actual expenses against the approved budget and

internal controls documented in a procedural Yes No

e fiscal integrity and accountability for all nses, and income? Yes No

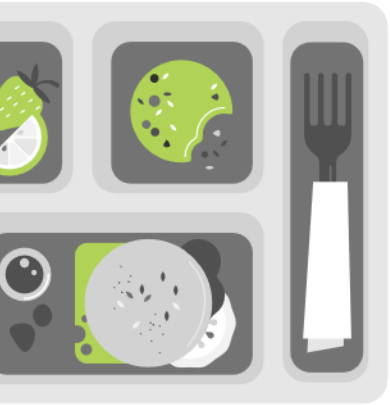
s in place to prevent and detect improper Yes No

NOTE: this is a streamlined form for PUBLIC/CHARTER schools – private/parchoical schools will need to fill out a longer form (ask your Program Specialist).

MISSISSIPPI DEPARTMENT OF EDUCATION

Annual Verification of Tax-Exempt Status

Must prove that you are public or non-profit



- **Prior Rule:** Sponsor must be public or private non-profit in order to participate
- **New Rule:** annual conformation of tax-exempt status required at time of application

How SA issue site caps

- SA must establish cap (max # meals served) for each meal service when approving each site.
- **New Rule:** clarifies that **vended** sites may request cap adjustment at any time prior to claim;

Duration of Eligibility

Reduce Administrative Burden Associated with Area Eligibility

- **Prior Rule:** Area Eligibility Determined every 3 years
- **New Rule:** codifies guidance from SFSP 03-2017 to allow school or census data to be required every 5 years

That's It! Any Questions?