

Name of Facility			
Facility Agreement Number		Date of Request	
Person Submitting Request		Phone Number	

Grab and Go

Parent or Guardian Pick Up

Multi-Meal Distribution

Home Delivery (Programs with Enrolled Participants Only)

Please complete the section below that corresponds with the Waiver you are requesting.

Grab and Go Meals (CACFP, CACFP At-Risk, SFSP)

1. What date is the sponsor planning to start the program?

2. What program is the sponsor running under the waiver (ie CACFP, CACFP At-Risk or SFSP)?

CACFP

CACFP At-Risk

SFSP

3. What site(s) is the sponsor planning to serve meals at? Please list the address, day, and times for each site.

4. How will meals actually meet the meal pattern?

5. How will you ensure social distancing?

6. What are the times you plan to serve meals? Please indicate in the plan.

7. How will you ensure temperatures are maintained during transport?

8. Please indicate how sanitizing/washing of hands will be monitored and maintained during meal prep and distribution?

Parent or Guardian Pick Up

1. How the sponsor plan to ensure site maintains accountability and program integrity during the parent pick up?

2. How will the sponsor ensure meals are provided to parent or guardians of eligible children?

3. How will the sponsor ensure meals are not duplicated to children?

4. How will the sponsor document the number of meals provided?

5. How will the sponsor ensure social distancing during Parent or Guardian Pickup?

Multi-Meal Distribution (CACFP, CACFP At-Risk, SFSP)

1. Provide a copy of their Public Notice within 48 hours before starting the program.

Completed

Will be submitted on the following date:

2. Notify enrolled families through electronic or written letter.

Electronic Letter

Written Letter

Other:

3. Upload both to SNP site.

Completed

Not Required

4. Explain how the meals will be packaged.

Explain how directions will be provided to families on storage, heating, refrigeration, and days of the week for each meal.

Explain how breakfast/lunch/snack/dinner will be placed on each meal so children understand how and when to eat each meal or snack.

5. Explain how the facility will ensure families have proper warming and refrigeration techniques.

6. How will documentation be maintained?

Home Delivery (CACFP Child or Adult Care ONLY)

- 1. Describe how the sponsor will contact households of enrolled children/adult participants and verify families have proper warming and refrigeration techniques.**

- 2. Describe how the sponsor will obtain written or electronic consent from the household of enrolled children/adults giving permission for delivery of meals to the verified address of the enrollee.**

- 3. Describe how the sponsor will maintain records and confidentiality of children and their households throughout the process.**

- 4. Describe the process for delivery to include time of delivery, number of meals delivered at one time, method of delivery, method of regulating temperature during delivery process.**

5. Describe the process the sponsor will use to ensure social distancing.

6. Describe the process for ensuring sanitizing, handwashing, and masks are maintained during delivery of meals to homes.

DO NOT WRITE BELOW THIS LINE!
HEALTH AND NUTRITION UNIT USE ONLY

Your Request has been reviewed and the following items have been APPROVED or DENIED. If your waiver request was denied, please make the appropriate changes, if applicable, and resubmit your request.

Approved

Grab and Go

Parent and Guardian Pickup

Home Delivery

Multi-Meal Distribution

Comments:

Denied

Grab and Go

Parent and Guardian Pickup

Home Delivery

Multi-Meal Distribution

Comments: