

## 2020 NSLP FEDERAL FOOD SERVICE EQUIPMENT GRANT APPLICATION

### 1. Applicant Data

Complete this section below with information about the school. Note: School Food Authorities may submit multiple applications, up to one for each site (school) within the SFA.

Name of School Food Authority: \_\_\_\_\_  
(Note: this is the SU/SD unless the SFA is an independent school)

Name of Site (School): \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

### 2. Certification Statement

The grant application/certification statement must be signed by the Food Service Manager or Director, and the Principal, the Business Manager, and the Superintendent.

<b>Certification Statement:</b> I certify that the information in this application is true and correct to the best of my knowledge, and that the equipment acquired with these funds will be used in the non-profit National School Lunch Program to meet the nutritional needs of students.		
Signature:	Title: Food Service Manager/Director	Date:
Signature:	Title: School Principal	Date:
Signature:	Title: Business Manager	Date:
Signature:	Title: Superintendent	Date:

Note: Only original ink signatures are acceptable. This page must be mailed or hand delivered.



### 3. Equipment Specifications

Check off whether this grant is for repair of existing equipment, replacement of existing equipment or purchase of new equipment, and answer the appropriate question.

**Repair of Existing Equipment:** Describe the equipment to be repaired. Include the item’s age, description of the repairs to be made, and tell us why the SFA is choosing to repair the equipment rather than replacing it. You may attach a written estimate for repairs, if available.

**Replacement of Existing Equipment:** Describe the equipment that is being replaced. Include the item’s age and tell us why the SFA is choosing to replace the equipment. Describe the new equipment, including item, make, model and size. Why was this particular new item chosen? You may attach spec sheets for the new item, if available.

**Purchase of New Equipment:** Describe the new equipment, including item, make, model and size. Why was this particular new item chosen? You may attach spec sheets for the new item, if available.

### 4. Budget

Please provide a breakdown of the funds you are requesting.

Function	Obj	Obj Category	Item	Cost
3100	100	Emp Salary	Installation or repair labor – Employee salary ( <i>explain below</i> )	
3100	200	Emp Benefits	Installation or repair labor – Employee benefits ( <i>explain below</i> )	
3100	300	Purchased Services	Installation or repair labor - Contracted services ( <i>explain below</i> )	
3100	600	Supplies	Repair Parts, Delivery	
3100	700	Property	New Equipment	
3100			Other ( <i>explain below and fill in appropriate function and object codes</i> )	
Total Funds Requested				

If installation or other costs are included, describe those here, or attach estimate documentation:

## 5. Grant Narrative

Please respond to the following questions to support your request for these funds. You may complete the questions here or attach a separate grant narrative that addresses each question. Please limit the response to each question to five sentences.

A. Will this equipment improve the quality and nutrition of meals served in the school meals programs? If so, describe how.

B. Will this equipment improve the safety of the meals served in the school meals programs? If so, describe how.

C. Will this equipment improve the energy efficiency of the school meals program operations? If so, describe how. You may wish to attach Energy Star information for the equipment to be purchased.

D. Will this equipment be used to improve or expand participation in the National School Lunch Program and/or School Breakfast Program? If so, describe how.

E. Will this equipment be used to create program efficiencies and ensure program integrity? If so, describe how.

F. Describe how the school will comply with the timeline of purchasing the equipment and submitting the expenditure documentation within the required timeframe. If there are barriers that might prevent the school from meeting this timeline, please indicate what these might be. No purchases may be made before the grant agreement has been signed by both the SFA and the Secretary of Education. We require that the equipment be purchased no later than June 30, 2020, and the AOE 3.0 claim for reimbursement filed no later than July 31, 2020.

G. Describe the other equipment fund resources that the school currently has available for the food service program and well as the total net cash resources for the SFA as of June 30, 2019.

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### 6. Bids Received

Proper procurement practices must be followed. If the equipment falls below the micro-purchase threshold (\$10,000 unless there is a lower local threshold), then the micro-purchase method may be used. However, applicants who receive at least three quotes/bids will receive a higher score on the grant application. List the bids/quotes received:

Name of Vendor	Total amount of bid/quote

You may include any additional information or attach any documents you wish supporting your request although not specifically required.

Complete applications should be mailed or delivered to:

Child Nutrition Programs  
Vermont Agency of Education  
1 National Life Drive, Davis 5  
Montpelier, VT 05620-2501

Applications must be received by 4:30pm on Friday, February 28, 2020. Supporting documentation and grant narratives may be submitted by email to [ailynne.adams@vermont.gov](mailto:ailynne.adams@vermont.gov), however a hard copy of the front signature page with original signatures must be mailed or delivered.

## NONDISCRIMINATION STATEMENT

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.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at:

[http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), 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) 632-9992. 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.