

# Introduction – Permanent Agreement, Application, and MARS

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**Charles Crawford**

Deputy Director of Child Nutrition

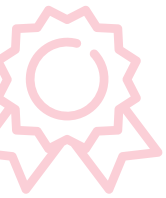
[mdek12.org](https://mdek12.org)



MISSISSIPPI  
DEPARTMENT OF  
EDUCATION

June 2025





1

**ALL** Students Proficient and Showing Growth in All Assessed Areas



2

**EVERY** Student Graduates from High School and is Ready for College and Career



3

**EVERY** Child Has Access to a High-Quality Early Childhood Program

**EVERY** School Has Effective Teachers and Leaders

4



**EVERY** Community Effectively Uses a World-Class Data System to Improve Student Outcomes

5



**EVERY** School and District is Rated “C” or Higher

6



## VISION

To create a world-class educational system that gives students the knowledge and skills to be successful in college and the workforce, and to flourish as parents and citizens



## MISSION

To provide leadership through the development of policy and accountability systems so that all students are prepared to compete in the global community

- Name
- District
- How long have you been in Child Nutrition?
- What is something you are nervous about? What can we de-mystify in this training?
- What is something you are confident or excited about?



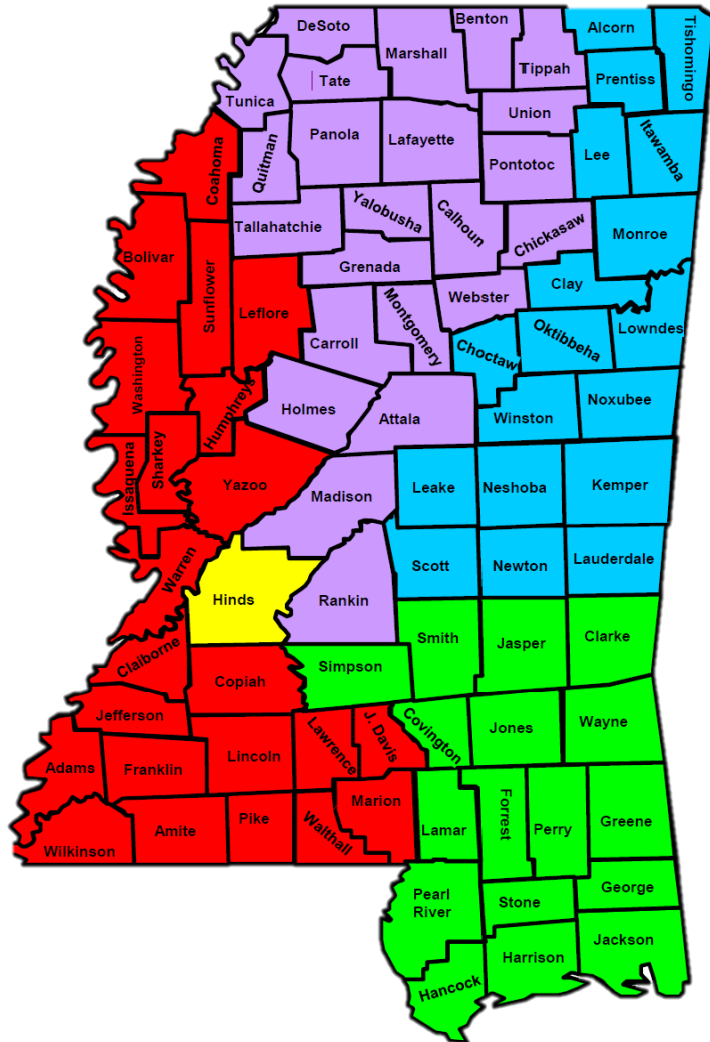
- Mississippi Department of Education Office of Child Nutrition
- **Who does what you need?**
- Division - CACFP
- Division - School Support
- Division - Training
- Division - Purchasing
- Division – Nutrition Team
- Division - Grants
- Division - Healthy Schools

The Mississippi Department of Education, Office of Child Nutrition, Division of School Support is responsible for administering and directing USDA Food and Nutrition Service (FNS) compliance for pass-through funds. This includes:

- 1. **Auditing and Compliance:** Ensuring organizations that receive these funds in the state comply with federal regulations for meal reimbursement.
- 2. **Technical and Program Assistance:** Providing support to organizations to help them meet program requirements and improve their meal service operations.
- 3. **Timely Submissions:** Ensuring that all required reports and documentation are submitted to the USDA in a timely manner.
- 4. **Site Visits:** Conducting site visits to provide technical assistance and ensure compliance with program standards.
- 5. **Application Management:** Managing applications for various school meal programs to ensure eligibility and proper allocation of resources.
- 6. **Support and Training:** Offering training and resources to school districts to help them implement and maintain effective nutrition programs.
- Overall, the division works to ensure that children in Mississippi have access to nutritious meals at school, promoting their health and educational success.

# Meet Your Program Specialist!

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- Natalie Smith
- Kaneisha Barnett & Chris Salley
- Quatrice Hyde & Shavika Conerly
- Dawn Camel & Shaniya Hart
- Ms. Shon Wright & Ms. Tina Thomas

Director of Monitoring - Ms. Taquasia Hicks

Director of Technical Assistance - Ms. Shawn Shaw

NOTE: SS Regions are different from Purchasing Regions

# Permanent Agreement & Annual Enrollment for NSLP/SBP

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**Charles Crawford**  
Deputy Director of Child Nutrition

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June 2025





# Just How “Permanent” is the Permanent Agreement?

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## Do I ever have to re-do my permanent agreement?

- YES! Sometimes you do!
- If you have a change in administrators or signatures, the SA will ask you to re-do the Permanent Agreement.
- We generally check this when we process your annual application in MARS, but may ask you to re-do it mid year if you have a change in administration.
- You may go for years without having to re-do your permanent agreement.



## Agreement for Participation

In relevant programs

- NSLP
- SBP
- ASCP
- Food Distribution
- SSO

## Online Agreement

Agreement between the SA and SFA to conduct business through MARS



Rev. 7/18

STATE OF MISSISSIPPI-DEPARTMENT OF EDUCATION  
OFFICE OF CHILD NUTRITION

AGREEMENT BETWEEN SCHOOL FOOD AUTHORITY AND DEPARTMENT OF EDUCATION  
(National School Lunch, School Breakfast, After School Care Snack, and Food Distribution Programs)

1. (Official name and mailing address of the District/School, RCCI or Administering Agency)

Please correct any information on above label.

2. I/we certify that the information contained in this Agreement, and all applicable forms, is true and correct to the best of my/our knowledge, that reimbursement will be claimed only for meals served to children, and that school(s)/sites do not discriminate on the basis of race, color, national origin, sex, age, or disability. Schools/sites participating the After-School Care Snack Program provide education or enrichment programs to the children receiving snacks. All meals claimed for reimbursement follow 7CFR 210 and other program regulations for food components/items and quantities, for documentation of the food items served, and for the number of children receiving the food.

SCHOOL FOOD AUTHORITY	STATE DEPARTMENT OF EDUCATION
Name _____	Name <u>Scott Clements</u>
By _____ (Signature)	By _____ (Signature)
Title _____	Title <u>Director, Office of Child Nutrition</u>
Date _____	Date _____

SIGNING OF AGREEMENT: The **original Agreement** must be signed and submitted, with all applicable forms, to the State Department of Education. When this Agreement is approved, a copy will be returned for the files of the School Food Authority.

If an alternate name is to be authorized to sign claim forms and correspond information regarding this Agreement, please complete this section. Authorization for an alternate signature on the SFS-4 (Monthly Claim For Reimbursement) and/or amendments to this Agreement:

Name of Alternate \_\_\_\_\_

Title of Alternate \_\_\_\_\_

Signature of Alternate \_\_\_\_\_

Phone Number \_\_\_\_\_

3. If a FAX is to be utilized to transmit information regarding the Agreement or the Claim for Reimbursement, the authorized signatures, as shown on this Agreement, are to be accepted as original on the FAX copy: FAX - YES NO (Circle or underline answer.)

This is the  
first page of a  
12-page  
document

# Who signs where?

12

SCHOOL FOOD AUTHORITY	STATE DEPARTMENT OF EDUCATION
Name _____	Name <u>Scott Clements</u>
By _____ (Signature)	By _____ (Signature)
Title _____	Title <u>Director, Office of Child Nutrition</u>
Date _____	Date _____

SIGNING OF AGREEMENT: **The original Agreement** must be signed and submitted, with all applicable forms, to the State Department of Education. When this Agreement is approved, a copy will be returned for the files of the School Food Authority.

If an alternate name is to be authorized to sign claim forms and correspond information regarding this Agreement, please complete this section. Authorization for an alternate signature on the SFS-4 (Monthly Claim For Reimbursement) and/or amendments to this Agreement:

Name of Alternate \_\_\_\_\_

Title of Alternate \_\_\_\_\_

Signature of Alternate \_\_\_\_\_

Phone Number \_\_\_\_\_

- The **Main Signature** goes on top. This is typically the Superintendent.
- The **Alternate Signature** goes below. This is typically the CND, but may be the Business Manager or someone else. It is up to your district.

# Who signs where?

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SCHOOL FOOD AUTHORITY	STATE DEPARTMENT OF EDUCATION
Name _____	Name <u>Scott Clements</u>
By _____ (Signature)	By _____ (Signature)
Title _____	Title <u>Director, Office of Child Nutrition</u>
Date _____	Date _____

The **State Agency** signs here

SIGNING OF AGREEMENT: **The original Agreement** must be signed and submitted, with all applicable forms, to the State Department of Education. When this Agreement is approved, a copy will be returned for the files of the School Food Authority.

If an alternate name is to be authorized to sign claim forms and correspond information regarding this Agreement, please complete this section. Authorization for an alternate signature on the SFS-4 (Monthly Claim For Reimbursement) and/or amendments to this Agreement:

Name of Alternate \_\_\_\_\_

Title of Alternate \_\_\_\_\_

Signature of Alternate \_\_\_\_\_

Phone Number \_\_\_\_\_

# Contents of Permanent Agreement

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## What is contained in this document?

- Roles & responsibilities of the SFA and MDE
- Meal Pricing requirements
- Submitting claims
- Role of the SFA in preventing discrimination
- Elimination of openly Identification



# Annual Enrollment for NSLP/SBP in MARS

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And Revisions!

# Permission to Access

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If you need access to MARS, you will need to complete the MARS login form

**MARS System Login Authorization Form for User ID and Password**

The Office of Child Nutrition (OCN) has developed a web based program system for collecting information related to the operation of USDA Food Nutrition Programs. This system utilizes user identification codes (ID's) and passwords to authenticate and certify the information submitted. **These ID's and passwords carry the same authority as an original signature.** This form allows you to identify the staff you will authorize to perform functions within our system. **Please list by each security function, the name of the individual who will perform these functions.** These individuals will be given ID's and passwords for use in our system. You must enter at least one name for Section I Application and Agreements and one name for Section II Claim Submission.

Organization Name:

Organization ID Number:

Organization Email:

OCN Program Specialist:

Program Name(s) : ☐ NSLP ☐ CACFP ☐ SFSP ☐ Special Milk

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**Application and Agreements:** To submit or amend information for participation in USDA programs administered by OCN (New information, renewals, amendments, certification, and training registration). (TYPE or PRINT)

Name of Individual:  ☒ Add ☐ Delete

Name of Individual:  ☐ Add ☒ Delete

Name of Individual:  (View Only Rights)

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**Claim Submission:** Submission, updating, amending, monthly meal claims for reimbursement and financial claims. (TYPE or PRINT)

Name of Individual:  ☒ Add ☐ Delete

Name of Individual:  ☐ Add ☒ Delete

Name of Individual:  (View Only Rights)

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This form must be signed by this organization's Superintendent, Chief Executive Officer, President or duly authorized representative, as recognized on the program agreement on file with OCN.

To submit, mail to the address below, email the program specialist, or fax 601-359-7595.

Printed/Typed Authorized Name:

Authorized Signature: \_\_\_\_\_

Please return this form to:  
Office of Child Nutrition  
P.O. Box 771  
Jackson, MS  
39205

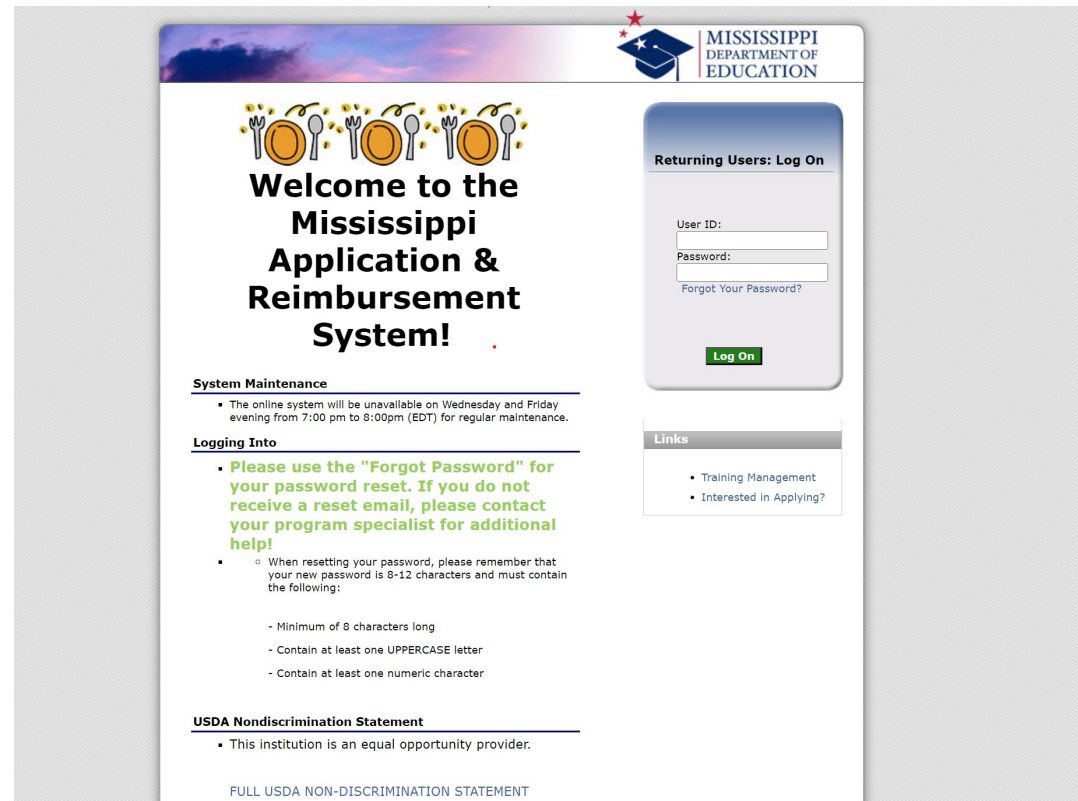




**Welcome to the  
Mississippi  
Application &  
Reimbursement  
System!**

- Each organization that participates in any Child Nutrition (CN) Program is required to enroll annually in the MS Application & Reimbursement System (MARS)
- Enrollment Typically occurs in July/August each year to coincide with the beginning of the new School Year (SY)

# Mississippi Application & Reimbursement System



The screenshot displays the login interface for the Mississippi Application & Reimbursement System. The header features the Mississippi Department of Education logo and name. The main content area is divided into two columns. The left column contains a welcome message with a decorative graphic of plates and cutlery, followed by system maintenance and login instructions. The right column contains a login form for returning users and a links section.

**Welcome to the Mississippi Application & Reimbursement System!**

**System Maintenance**

- The online system will be unavailable on Wednesday and Friday evening from 7:00 pm to 8:00pm (EDT) for regular maintenance.

**Logging Into**

- Please use the "Forgot Password" for your password reset. If you do not receive a reset email, please contact your program specialist for additional help!**
- When resetting your password, please remember that your new password is 8-12 characters and must contain the following:
  - Minimum of 8 characters long
  - Contain at least one UPPERCASE letter
  - Contain at least one numeric character

**USDA Nondiscrimination Statement**

- This institution is an equal opportunity provider.

FULL USDA NON-DISCRIMINATION STATEMENT

**Returning Users: Log On**

User ID:

Password:

[Forgot Your Password?](#)

**Log On**

**Links**

- [Training Management](#)
- [Interested in Applying?](#)



- Reset Password
- Download Forms
- Applications
- Claims (SNP / SSO / FFVP)
- Compliance

## An Overview



- To participate in the School Nutrition Program, Organizations must submit an Application Packet to the State for review and approval.
- A new Application Packet must be submitted and approved at the beginning of each year.
- Certain information from the previous year's application rolls over into the new program year.
- The Organization may modify this data for the new program year or keep the prior year's data for use in the current application

## Complete and Submit it Early!



- Begin working on the packet as soon as the SA notifies you that the Application Packet is available in MARS.
- You cannot be reimbursed until your application is approved.
- You will not be reimbursed for any meals served prior to packet approval.

## State Board Policy



- The annual Application, Agreement and Free/Reduced Meal Policy related to receipt of Federal Funds for the National School Lunch Program, School Breakfast Program and Food Distribution Program shall have final approval by the State Department of Education prior to the service of any meals under the program.

## Documents-Actions needed for approval



- Sign Permanent Agreement
- Designated Titles Form
- Current Health Inspections
- Agreement to Furnish Foods
- Non-Discrimination Statement on webpage(new)
- Public Notification
- Local School Wellness Policy

**Let's complete your annual application!**



Let's Log  
in to  
MARS!

PRO TIP:  
Save this  
link as a  
favorite,  
because  
you will  
use it  
often!

Mississippi Child Nutrition Management System

<https://cnms.mdek12.org/prod/Splash.aspx>

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Returning Users: Log On

User ID:

Password:

[Forgot Your Password?](#)

**Log On**

**Welcome to the  
Mississippi  
Application &  
Reimbursement  
System!**

**System Maintenance**

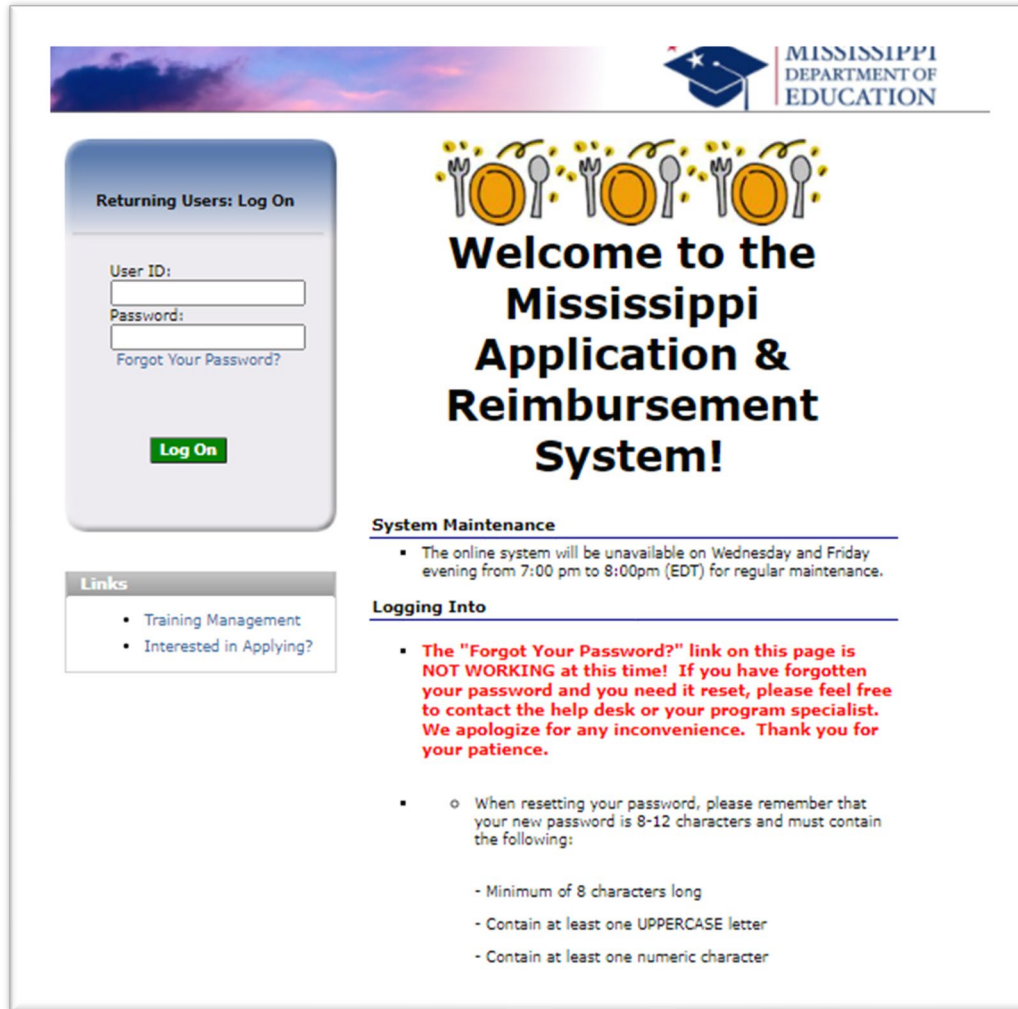
- The online system will be unavailable on Wednesday and Friday



<https://cnms.mdek12.org/prod/Splash.aspx>

# About the Home Page

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The screenshot shows the home page of the Mississippi Department of Education's Application & Reimbursement System. At the top, there is a header with the Mississippi Department of Education logo and name. Below the header, the page is divided into several sections. On the left, there is a 'Returning Users: Log On' section with fields for 'User ID:' and 'Password:', a 'Forgot Your Password?' link, and a 'Log On' button. In the center, there is a large graphic with the text 'Welcome to the Mississippi Application & Reimbursement System!' and a decorative border of plates and cutlery. To the right of the graphic, there are two sections: 'System Maintenance' and 'Logging Into'. The 'System Maintenance' section contains a bullet point stating that the online system will be unavailable on Wednesday and Friday evening from 7:00 pm to 8:00pm (EDT) for regular maintenance. The 'Logging Into' section contains a bullet point stating that the 'Forgot Your Password?' link is not working at this time and that users should contact the help desk or their program specialist if they have forgotten their password. Below this, there is a sub-bullet point stating that when resetting a password, it must be 8-12 characters long, contain at least one uppercase letter, and contain at least one numeric character. At the bottom left, there is a 'Links' section with two links: 'Training Management' and 'Interested in Applying?'.

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Returning Users: Log On

User ID:  
Password:  
Forgot Your Password?

Log On

Links

- Training Management
- Interested in Applying?

**Welcome to the  
Mississippi  
Application &  
Reimbursement  
System!**

**System Maintenance**

- The online system will be unavailable on Wednesday and Friday evening from 7:00 pm to 8:00pm (EDT) for regular maintenance.

**Logging Into**

- The "Forgot Your Password?" link on this page is **NOT WORKING at this time!** If you have forgotten your password and you need it reset, please feel free to contact the help desk or your program specialist. We apologize for any inconvenience. Thank you for your patience.
- When resetting your password, please remember that your new password is 8-12 characters and must contain the following:
  - Minimum of 8 characters long
  - Contain at least one UPPERCASE letter
  - Contain at least one numeric character

## Bulletin Board

The bulletin board is managed by MDE and provides general information. It is important to remember that the bulletin board on the home page is viewable by the public.

## Log on

The log on section is where authorized users enter their User ID and password.

If you forgotten your password, or lockout contact the School Support Help Desk at 601-576-5000



- Once you successfully log on, the Programs page is displayed.
- Actual access to specific modules is based on the user's security rights.
- The School Nutrition Program (SNP) module will be used most often as it will contain the NSLP and SBP

## CONTENT OVERVIEW

The following slides will point out the location of key elements in MARS

# Program Name

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**School Nutrition Programs**

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Applications | Claims | Compliance | Reports | Security | Search | Programs | Year | Help | Log Out

Applications > Application Packet > Packet Site List - SNP > School Year: 2021 - 2022

**VIEW** | MODIFY | DELETE | INTERNAL USE ONLY

[Show Changes](#)

### 2021 - 2022 SNP Site Application

00001      Status: Active <b>TEST SCHOOL DISTRICT</b> DBA: 100 Commerce Street Cityville, MS 39000-0000 Type of Agency: Educational Institution Type of SNP Organization: Public	0001      Status: Active <b>TEST SITE</b> 100 N. Franklin P.O. Box 10 Cityville, MS 39000-0000
--	--



## School Nutrition Programs



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EDUCATION

Applications | Claims | Compliance | Reports | Security | Search

 Programs | Year | Help | Log Out

Applications > Application Packet > Packet Site List - SNP >

School Year: 2021 - 2022

VIEW | MODIFY | DELETE | INTERNAL USE ONLY

Show Changes

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## School Nutrition Programs

Applications | Claims | Compliance | Reports | Security | Search

 Programs | Year | Help | Log Out

Applications > Application Packet > Packet Site List - SNP >

School Year: 2021 - 2022

[VIEW](#) | [MODIFY](#) | [DELETE](#) | INTERNAL USE ONLY

[Show Changes](#)

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School Nutrition Programs

Applications

Claims

Compliance

Reports

Security

Search

Programs

Year

Help

Log Out

Applications > Application Packet > Packet Site List - SNP >

School Year: 2021 - 2022

VIEW | MODIFY | DELETE | INTERNAL USE ONLY

Show Changes

2021 - 2022 SNP Site Application

00001      Status: Active

TEST SCHOOL DISTRICT

DBA:

100 Commerce Street

Cityville, MS 39000-0000

Type of Agency: Educational Institution

Type of SNP Organization: Public

0001      Status: Active

TEST SITE

100 N. Franklin

P.O. Box 10

Cityville, MS 39000-0000

**For security reasons, the system will automatically log you out after twenty (20) minutes of inactivity**



The screenshot shows the 'School Nutrition Programs' web application interface. At the top, the title 'School Nutrition Programs' is displayed in a large, bold, dark blue font. To the right of the title is the Mississippi Department of Education logo, which includes a graduation cap and the text 'MISSISSIPPI DEPARTMENT OF EDUCATION'. Below the title is a horizontal navigation bar with several menu items: 'Applications', 'Claims', 'Compliance', 'Reports', 'Security', 'Search', 'Programs', 'Year', 'Help', and 'Log Out'. The 'Applications' menu item is highlighted with a yellow background. A red arrow points to the 'Applications' menu item. Below the navigation bar, the text 'School Year: 2021 - 2022' is displayed. At the bottom of the screenshot, the text 'SNP Search Options' is visible.

**School Nutrition Programs**


MISSISSIPPI DEPARTMENT OF EDUCATION

**Applications** | Claims | Compliance | Reports | Security | Search | Programs | Year | Help | Log Out

School Year: 2021 - 2022

**SNP Search Options**

## School Nutrition Programs



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Applications | Claims | Compliance | Reports | Security | Search

 Programs | Year | Help | Log Out

Applications > School Year: 2021 - 2022

Item	Description
Application Packet	Applications Forms (Organization and Site)
Verification Report	Mandatory Annual Verification Report
Food Safety Inspections	Number of Food Safety Inspections by Site
Annual Audits	Annual Audits
FFVP Application Packet	Fresh Fruit and Vegetable Program Application Forms (SFA and Site)
Capital Expenditure Request	Request for funds to purchase capital items >= \$5,000
Community Eligibility Provision	Enrollment and Eligibility for Community Eligibility Provision
Financial Report	School Food Annual Revenues and Expenditures Report
Download Forms	Forms Available for Downloading

School Nutrition Programs



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Applications | Claims | Compliance | Reports | Security | Search

Programs | Year | Help | Log Out

Applications > Application Packet > School Year: 2021 - 2022

2021 - 2022 Application Packet

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
100 Commerce Street  
Cityville, MS 39000-0000

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

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	Organization Application	Original	Error
	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
<a href="#">Details</a>	Meal Pattern Compliance Dashboard		Pending
<a href="#">Details</a>	➔ Checklist Summary (2)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">View</a>	Application Packet Notes for Organization		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	2	0	0	0	1	3
Seamless Summer Option	0	0	0	0	0	0	0

< Back

Submit for Approval

Approve

Return


Deny

Withdraw Packet

This is the main dashboard for the Application Packet

## School Nutrition Programs

Applications | Claims | Compliance | Reports | Security | Search

MISSISSIPPI  
DEPARTMENT OF  
EDUCATION

Applications > Application Packet > School Year: 2021 - 2022

### 2021 - 2022 Application Packet

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
100 Commerce Street  
Cityville, MS 39000-0000

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

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	Organization Application	<a href="#">Original</a>	Error
	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
<a href="#">Details</a>	Meal Pattern Compliance Dashboard		Pending
<a href="#">Details</a>	➔ Checklist Summary (2)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">View</a>	Application Packet Notes for Organization		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	2	0	0	0	1	3
Seamless Summer Option	0	0	0	0	0	0	0

[< Back](#) [Submit for Approval](#) [Approve](#) [Return](#) [Deny](#) [Withdraw Packet](#)

Your Program Specialist will be listed right here!

School Nutrition Programs

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EDUCATION

Applications | Claims | Compliance | Reports | Security | Search | Programs | Year | Help | Log Out

Applications > Application Packet > School Year: 2021 - 2022

2021 - 2022 Application Packet

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
100 Commerce Street  
Cityville, MS 39000-0000

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

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
<a href="#">Details</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	Organization Application	Original	Error
<a href="#">Details</a>	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
<a href="#">Details</a>	Meal Pattern Compliance Dashboard		Pending
<a href="#">Details</a>	Checklist Summary (2)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">View</a>	Application Packet Notes for Organization		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	2	0	0	0	1	3
Seamless Summer Option	0	0	0	0	0	0	0

< Back

Submit for Approval

Approve

Return

Deny

Withdraw Packet

You can click on “Modify” to complete your Organization Application



## School Nutrition Programs

[Applications](#) | [Claims](#) | [Compliance](#) | [Reports](#) | [Security](#) | [Search](#)

MISSISSIPPI  
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EDUCATION

[Programs](#) | [Year](#) | [Help](#) | [Log Out](#)

Applications > Application Packet > School Year: 2021 - 2022

### 2021 - 2022 Application Packet

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
100 Commerce Street  
Cityville, MS 39000-0000

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

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	Organization Application	Original	Error
	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
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Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	2	0	0	0	1	3
Seamless Summer Option	0	0	0	0	0	0	0

[< Back](#) [Submit for Approval](#) [Approve](#) [Return](#) [Deny](#) [Withdraw Packet](#)

Click on “School Nutrition Programs” link at the bottom to be taken to a new screen that lists all of your school sites.



School Nutrition Programs

Applications

Claims

Compliance

Reports

Security

Search

Programs

Year

Help

Log Out

Applications > Application Packet > Packet Site List - SNP > School Year: 2021 - 2022

2021 - 2022 Application Packet - SNP Site List

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
DBA:  
100 Commerce Street  
Cityville, MS 39000-0000  
  
Type of Agency: Educational Institution  
Type of SNP Organization: Public

Action	Site ID / Site Name	NSLP	SBP	ASCP	SMP	FFVP	Version/ Status	% Enroll Free/Redc Oct 2020
<b>Select All:</b> <input type="checkbox"/>	<b>Totals</b>	3	3	0	0	0		
<a href="#">View</a>   <a href="#">Modify</a> <a href="#">Admin</a>	<input type="checkbox"/> 0001 TEST SITE	X	X				Original / Error (2)	0.0000
<a href="#">View</a>   <a href="#">Modify</a> <a href="#">Admin</a>	<input type="checkbox"/> 0003 TEST HIGH SCHOOL	X	X				Original / Pending Validation	0.0000
<a href="#">View</a>   <a href="#">Modify</a> <a href="#">Admin</a>	<input type="checkbox"/> 0004 TEST ELEMENTARY SCHOOL	X	X				Original / Pending Validation	0.0000

[Add Site Application](#)  
[Print Selected Site Applications](#)

**Total Sites Enrolled: 3**

You can click “modify” next to each site name to complete information for that site.

# Packet Submission

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## School Nutrition Programs

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Applications > Application Packet > School Year: 2021 - 2022

### 2021 - 2022 Application Packet

00001    Status: Active  
**TEST SCHOOL DISTRICT**  
100 Commerce Street  
Cityville, MS 39000-0000

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

Packet Assigned To: unassigned

Action	Form Name	Latest Version	Status
<a href="#">View</a>   <a href="#">Modify</a>   <a href="#">Admin</a>	Organization Application	Original	Not Submitted
	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
<a href="#">Details</a>	✓ Meal Pattern Compliance Dashboard		Approved
<a href="#">Details</a>	✓ Checklist Summary (2)		
<a href="#">Details</a>	Application Packet Notes		
<a href="#">View</a>	Application Packet Notes for Organization		
<a href="#">Details</a>	Attachment List		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	3	0	0	0	0	3
Seamless Summer Option	0	0	0	0	0	0	0

[< Back](#) [Submit for Approval](#) [Approve](#) [Return](#) [Deny](#) [Withdraw Packet](#)

[Show Packet History](#)

Once all information has been entered, you should be able to click on “Submit for Approval” at the bottom of the main page of your Application Packet dashboard

- Once the Application is approved by the SA, Revisions can be made at any time by the SFA.
- The SA will be notified that the Revision has been submitted, allowing the SA to then approve the Revision.
- The Application must be in an approved status in order for the SFA to submit a claim.



# Charles Crawford

Deputy Director of Child Nutrition

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EDUCATION



# Non-Discrimination

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This institution is an equal opportunity provider.

Full Non-Discrimination Statement link:



**USDA** United States Department of Agriculture

**AND JUSTICE FOR ALL**

In accordance with Federal law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, disability, and reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.)

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, and American Sign Language) should contact the responsible State or local Agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

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.asec.usda.gov/sites/default/files/USDA-OASCR%20P-Complaint-Form-0508-0002-000-11-26-17%20.pdf>, from any USDA office, by calling (800) 698-9992, 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:  
(800) 255-1065 or (202) 690-7442;  
email:  
program.intake@usda.gov.

This institution is an equal opportunity provider.

Conforme a la ley federal y las políticas y regulaciones de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta institución tiene prohibido discriminar por motivos de raza, color, origen nacional, sexo, edad, discapacidad, venganza o represalia por actividades realizadas en el pasado relacionadas con los derechos civiles (no todos los principios de prohibición aplican a todos los programas).

La información del programa puede estar disponible en otros idiomas además del inglés. Las personas con discapacidades que requieren modos de comunicación alternativos para obtener información sobre el programa (por ejemplo, Braille, letra grande, grabación de audio y lenguaje de señas americano) deben comunicarse con la agencia estatal o local responsable que administra el programa o con el TARGET Center del USDA al (202) 720-2600 (voz y TTY) o comunicarse con el USDA a través del Servicio Federal de Transmisión de Información al (800) 877-8339.

Para presentar una queja por discriminación en el programa, el reclamante debe completar un formulario AD-3027, Formulario de queja por discriminación del programa del USDA, que se puede obtener en línea, en <https://www.asec.usda.gov/sites/default/files/USDA-OASCR%20P-Complaint-Form-0508-0002-000-11-26-17%20.pdf>, en cualquier oficina del USDA, llamando al (800) 698-9992, o escribiendo una carta dirigida al USDA. La carta debe contener el nombre, la dirección y el número de teléfono del reclamante, y una descripción escrita de la supuesta acción discriminatoria con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR, por sus siglas en inglés) sobre la naturaleza y la fecha de la presunta violación de los derechos civiles. La carta o el formulario AD-3027 completado debe enviarse al USDA por medio de:

correo postal:  
U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; o  
fax:  
(800) 255-1065 o (202) 690-7442;  
correo electrónico:  
program.intake@usda.gov.

Esta institución ofrece igualdad de oportunidades.

Form AD-3027—Revised Notice of Remedial September 2019





# Questions?

