



STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION



TO: Sponsors of the National School Lunch Program (NSLP) and School Breakfast Program (SBP)

FROM: Therese Dandeneau, Education Consultant *Therese A. Dandeneau*
Bureau of Health/Nutrition, Family Services and Adult Education

DATE: January 28, 2013

SUBJECT: Operational Memorandum # 10-13
Verification Summary Report

The Verification Summary Report and instruction sheet for reporting 2012-13 school year data are attached and will be posted during the week of January 14, 2013, on the Child Nutrition Program (CNP) Web site. Please note that this form must be filed by *all* NSLP and SBP sponsors, including all Residential Child Care Institutions and all Provision 2 sponsors. **One report per sponsor** must be submitted to the CNPs no later than **February 22, 2013**. **Note:** *Failure to submit the report by the due date could lead to the withholding of your CNPs claims for reimbursements.*

If your district has not already submitted the Verification Summary Report, please forward this report to Glenda Stuckey, Child Nutrition Programs, 25 Industrial Park Road, Middletown, CT 06457 or e-mail glenda.stuckey@ct.gov.

Questions pertaining to this memorandum may be directed to:

COUNTY ASSIGNMENTS	CONSULTANT
Litchfield County New London County	Fionnuala Brown fionnuala.brown@ct.gov 860-807-2129
Fairfield County Middlesex County (towns/cities beginning with C-E) New Haven County (towns/cities beginning with A-M)	Jackie Schipke jackie.schipke@ct.gov 860-807-2123
Middlesex County (towns/cities beginning with F-W) Tolland County Windham County	Susan Alston susan.alston@ct.gov 860-807-2081
Hartford County New Haven County (towns/cities beginning with N-W)	Teri Dandeneau teri.dandeneau@ct.gov 860-807-2079

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Attachments: (2)

Instructions for Completing the Local Education Agency (LEA) Verification Summary Report

Please complete the attached LEA Verification Summary Report and return the form no later than **February 22, 2013**, to Glenda Stuckey, Child Nutrition Programs, 25 Industrial Park Road, Middletown, CT 06457 or e-mail Glenda at glenda.stuckey@ct.gov. Questions regarding verification may be directed to Teri Dandeneau 860-807-2079 or teri.dandeneau@ct.gov.

Instructions for completing the form are below. **One form per sponsor** must be completed and submitted. Do not send multiple forms for each school. **Note the changes in the reporting of foster children highlighted in red font below.**

All Sponsors Must Complete this Section:

Enter the required identifying information for the LEA, e.g., LEA Name, Agreement Number, Type of LEA (Public, Private or Residential Child Care Institution). Note: ***If you are a Residential Child Care Institution (RCCI) and you do not have day students, check off the "No Day Students" box.***

Section I. Enrollment, Application, and Eligibility Information (Pre-Verification) Note: Report Items 1-4 as of the first operating day in October.

1. List the total number of schools and RCCI sites operating the National School Lunch Program (NSLP) and/or School Breakfast Program (SBP) as they appear on your online Agreement.
2. List the total number of enrolled students who have **access** to the NSLP and/or SBP.
3. In Column A, report the TOTAL NUMBER OF FREE ELIGIBLE STUDENTS that the LEA reports as of the first operating day in October. ***This total must equal the sum of the three free eligibility categories which are reported on lines 3-1A through 3-3A.*** For example, if you list 250 total free eligible students on line 3A, then lines 3-1A, 3-2A and 3-3A must add up to 250.

3-1. In Column A, report the TOTAL NUMBER OF **STUDENTS** approved as FREE ELIGIBLE whose approval is not subject to verification. This includes students that are:

- on the homeless liaison list;
- directly certified based on information pertaining to the Supplemental Nutrition Assistance Program (SNAP) or Temporary Family Assistance (TFA) sent by the Department of Social Services (DSS) (including their siblings residing in the same household). *This also includes DSS direct certification letters AND student names that appear on the DSS direct certification list;*
- income eligible Head Start;
- pre-K Even Start;
- residents enrolled in RCCIs;
- **certain foster children***; and
- non-applicants who are approved by local officials.

***Note: If the guardian of a foster child submitted proof from a state or local agency demonstrating the child's foster child status; then list the child in this column (3-1A).**

3-2. In Column A, report the TOTAL NUMBER OF **STUDENTS** (and their siblings residing in the same household) approved as FREE ELIGIBLE based on a

Instructions for Completing the Local Education Agency (LEA) Verification Summary Report

SNAP/TFA case number, which was *submitted on an application* (Categorically Eligible Applications). These are the free applications where the parent/guardian listed a SNAP or TFA number. Report the total number of approved free categorically eligible APPLICATIONS in section 3-2 B. **Note: Foster children are now considered categorically eligible unless, the guardian submitted proof from a state or local agency proving their foster child status. If the guardian submitted proof from a state or local agency of a child's foster status, then the foster child would be listed in 3-1A. In addition, if the foster child is included on an application where the household lists a SNAP or TFA number (categorical eligibility) for the non-foster children, LEAs should list the foster child and the non-foster children in 3-2A and then list the application only once in 3-2B. If the guardian submitted a separate, individual application for the foster child (and no proof from the state or local agency) then you would count the foster child in 3-2A and the application in 3-2B. Also, if the guardian submits an application with both foster children and non-foster children listed, AND the non-foster children are determined to be ineligible for free or reduced price benefits, report the foster child as categorically eligible (in 3-2A) AND also include the application in 3-2B.**

3-3. In Column A, report the TOTAL NUMBER OF **STUDENTS** approved as FREE ELIGIBLE based on household size and income information submitted on an application. Report the total number of approved free *income* APPLICATIONS in section 3-3 B. **(Do not include foster children here.)**

4. In Column A, report the total number of STUDENTS approved as REDUCED PRICE ELIGIBLE. In Column B, report the total number approved reduced price eligible APPLICATIONS on file.

Section II Results of Verification, by Application Type.

5. Check-off the type of verification process the LEA used.

In summary:

- **Standard Sample Size** – Verification type used if your nonresponse rate for the previous year was *greater* than 20 percent. Error prone applications must be selected.
 - **Alternate 1** – Verification type used if your nonresponse rate for the previous year was less than 20 percent. The minimum required sample size is 3 percent or 3,000, which ever is less, of all approved applications on file on October 1. The applications must be selected at **random** without consideration of which are error-prone.
 - **Alternate 2** – Verification type used if your nonresponse rate for the previous year was less than 20 percent. Verify 1 percent of total approved applications; if this percentage results in verifying more than 1,000 applications, the LEA may limit verification to 1,000 applications. The sample must be taken from error-prone applications. **Plus**, verify the lesser of .5 percent (half of 1 percent) or 500 applications with a case number (SNAP, TFA applications).
6. Rows 6 through 10 are reported as of the date verification is completed. For the purposes of this report, verification can be considered complete when the following occurs:
 - for situations where there is no change in eligibility due to verification; verification is considered complete as of the date of the confirmation of no change in status by a verifying official; and/

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- or situations where there is a change in eligibility due to verification; verification is considered complete when the notice of adverse action is sent to the household.
- **For Row 6 - No Change:** Report the number of verified *applications*, which had no change in eligibility. Also report the total number of *students (including siblings)* listed on these verified applications, for each application type. Both the total applications and total number of students should be placed in the appropriate column: either Column A, which represents categorically eligible applications (**including certain foster children**), Column B, which represents income applications, or Column C, which represents selected verified applications that were reduced.
- **For Row 7 - Responded, Changed to Free:** Report the number of reduced price verified *applications* for which the eligibility was changed to free based on the results of the verification process. Also report the total number of *students (including siblings)* listed on these verified applications. Both the total applications and total number of students impacted by this change should be placed in the appropriate column: Column C, which represents selected verified applications that were reduced.
- **For Row 8 - Responded, Changed to Reduced Price:** Report the number of verified *applications* for which the eligibility was changed to reduced based on the results of the verification process. Also report the total number of *students* listed on these verified applications. Both the total applications and total number of students (*including siblings*) impacted by this change should be placed in the appropriate column: Either Column A, which represents categorically eligible applications (**including certain foster children**) or Column B which represents income applications.
- **For Row 9 - Responded, Changed to Paid:** Report the number of verified *applications* for which the eligibility was changed to paid based on the results of the verification process. Both the total applications and total number of students (*including siblings*) impacted by this change should be placed in the appropriate column: Either Column A, which represents categorically eligible applications (**including certain foster children**), Column B which represents income applications, or Column C which represents selected verified applications that were reduced.
- **For Row 10 - Did Not Respond:** Report the number of verified *applications* for which the eligibility was changed to paid because the household did not respond to the verification process. Both the total applications and total number of students (*including siblings*) impacted by this change should be placed in the appropriate column: Either Column A, which represents categorically eligible applications (**including certain foster children**), Column B which represents income applications, or Column C which represents selected verified applications that were reduced.
Report ALL applications for which the household did not respond, even if the students on the applications continued to receive free or reduced price meals while being claimed as paid.

Note: The following are considered non-response situations which must be reported in the “Did Not Respond” category: 1) The household does not contact the LEA when the initial request for verification is sent or when the LEA attempts follow-up; 2) The household responds to the initial request but provides incomplete information and the LEA is unable to determine if the eligibility determination was correct; or 3) The household responds to the initial request but fails to provide the LEA with documents or is otherwise unable to provide appropriate documentation.

All sponsors must complete this section.

VERIFICATION SUMMARY REPORT 2012-13

Must be submitted by February 22, 2013

Section I. Enrollment, Application, and Eligibility Information (Pre-Verification)

Report Items 1 through 4 as of the first operating day in October.	All Schools ↓	
1. Number of schools and/or RCCI sites operating the NSLP and/or SBP		
2. Number of enrolled students with access to the NSLP (or SBP for SBP only schools)		
Record the number of STUDENTS in Column A and the number of APPLICATIONS in Column B for this section below.	A. # of Students	B. # of Approved Applications ↓
3. Total FREE ELIGIBLE reported		
3-1. # approved as FREE ELIGIBLE who are not subject to verification (directly certified students on the DSS list or letters , homeless liaison list, income-eligible Head-Start, pre-K Even Start, certain foster children , residential students in RCCIs, non-applicants approved by local officials.) The number reported should NOT be zero.		Record the number of approved APPLICATIONS in 3-2B, 3-3B, & 4B below.
3-2. # approved as FREE ELIGIBLE based on SNAP/TFA case number submitted on an application (Categorically Eligible) New: Include certain foster children here. Refer to the instructions.		
3-3. # approved as FREE ELIGIBLE based on income/household size information submitted on an application		
		B. # of Approved Reduced Applications ↓
4. Total REDUCED PRICE ELIGIBLE reported		

LEA Name:			
Agreement Number:			
TYPE OF LEA: <i>Check one</i>	<input type="checkbox"/> Public	<input type="checkbox"/> Private	
	<input type="checkbox"/> RCCI	<input type="checkbox"/> RCCI No Day Students	
Name of person completing form:			
Phone Number:		E-mail:	

Section II. Results of Verification, by Application Type

5. Type of Verification Used (Check one) Refer to Instructions for definitions.

Standard Sample Size Alternate 1 Alternate 2

		A. FREE Eligible based on SNAP/TFA Application or certain foster children status (Categorically Eligible)	B. FREE Eligible based on Income/Household Size Application (Income Eligible)	C. REDUCED PRICE Eligible
Items 6 through 10 are required and are reported as of the date of completion of the verification process (see instructions.)	6. No Change	# applications		
		# students & siblings		
7. Responded, Changed to Free		# applications		
		# students & siblings		
8. Responded, Changed to Reduced Price		# applications		
		# students & siblings		
9. Responded, Changed to Paid		# applications		
		# students & siblings		
10. Did Not Respond Changed to Paid		# applications		
		# students & siblings		

Complete and mail to: Glenda Stuckey, Child Nutrition Programs, 25 Industrial Park Road, Middletown, CT 06457. Forms may also be emailed to: glenda.stuckey@ct.gov. Questions may be directed to Teri Dandeneau at 860-807-2079.