

Date: 8/29/2023  
To: \_\_\_\_\_  
From: Nadia Thompson, School Nutrition Assistant  
Subject: Reimbursable After School Snack Program

Thank you for your interest in the Reimbursable After School Snack Program (ASSP). To participate in the program a supervised program must be in place which offers scheduled educational or enrichment activities during each day the program operates. Programs which operate on days that school is not in session are not eligible for reimbursement. You may request snacks on these days and be billed for them at \$1.00 per snack.

Enclosed is an application which must be completed to qualify for the snack program. An application must be submitted for each program. Attached are the procedures for the program which are required and a certification form which must be completed and returned. A required participation roster is included.

The program site supervisor overseeing the daily operation should work closely with the School Nutrition Manager. A School Nutrition Supervisor is required to make two site visits during the program's operation.

Please call 252-830-4226 if you have any questions.

# Agreement to Furnish After School Snacks

2023 - 2024

Complete and submit application to the Pitt County Schools School Nutrition Department. A copy of the application will be returned after approved.

Name of Person Making Request: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Email address: \_\_\_\_\_

Address (for billing): \_\_\_\_\_

Contact for program if other than Requestor: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

## Program Operations Section:

Name of after school program: \_\_\_\_\_

School site where the After School Program will operate from: \_\_\_\_\_

List location if other than school site for distributing snacks: \_\_\_\_\_

Has your program received snacks from Pitt County School Nutrition before? Yes \_\_\_\_\_ No \_\_\_\_\_

Will program operate continuous except for days school is out of session? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

List ages/grades participating: \_\_\_\_\_ What days of the week will the program operate? \_\_\_\_\_

Date the program will begin requiring snacks: \_\_\_\_\_ Date the program will stop requiring snacks: \_\_\_\_\_

If this program will operate for a period of time, then break and restart, indicate the dates of each session

Start date: \_\_\_\_\_ Stop date: \_\_\_\_\_ Start date: \_\_\_\_\_ Stop date: \_\_\_\_\_

Time School Day Ends: \_\_\_\_\_ Start Time for Snacks: \_\_\_\_\_ End Time for Snacks: \_\_\_\_\_

Estimated # of snacks per day? \_\_\_\_\_ Will snacks be required during times PCS is not operating? \_\_\_\_\_

**(Snacks provided when school is not in session will be billed at \$1.25 each)** A calendar for Pitt County Schools is available showing holidays. If you need snacks at times Pitt County Schools is normally closed, please indicate above.

Does your after school program include an educational or enrichment component? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

If your program is part of a tutorial program, you may be eligible to receive snacks at no charge through the After School Snack Program. If you are eligible, your site will be reviewed during the year by the School Nutrition Program to see that snacks meet the snack meal pattern, snacks are served as a whole unit, and accurate counts are taken for those who are actually participating in the snack program. If program requirements are not met, the snack program may be terminated. **Any snacks provided before program approval or for days not requested in this contract, snacks will be billed to the site program.**

If your program is not part of a tutorial program, you may purchase snacks from the School Nutrition Program. A deposit may be required before snacks are served. These snacks will not have to meet the After School Snack Program requirements. The snacks will be owned by the group who purchases them and may be offered at the discretion of the program director.

\_\_\_\_\_ total operating days per first month x \_\_\_\_\_ number of snacks/day x \_\_\_\_\_ cost = \_\_\_\_\_ total deposit

Snack programs offered other than at school site must be picked up by the group requesting snacks.

If the program will not operate on certain days, the program should let the site furnishing the snack know they will not be operating, otherwise, you will be billed for those snacks. You should only request snacks for the number participating in the program, otherwise, you may be billed an additional charge for snacks not meeting number of eligible. Any approved free snacks that cannot be claimed will be billed to the program.

Central Office: Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Tutorial \_\_\_\_\_ Non-tutorial \_\_\_\_\_

\_\_\_\_\_  
School Nutrition Director

\_\_\_\_\_  
Date

7/1/2019

## After School Snack Program Certification Information

Please review the After School Snack Program Procedures with everyone who will be involved with distribution of the snacks for the program. As the person requesting to participate in the program, you will be responsible for providing training to those designated at each site to operate the program. Each person you designate is responsible for providing accurate and true information in regards to the attendance roster, participation roster, and snacks received that meet or do not meet the reimbursable requirements.

**Please have each person sign below indicating they have been trained as to the requirements of the program. They need to understand each child must be provided all items for the snack to be reimbursable. They need to understand adults are not allowed to eat the snacks or take any snacks that are leftover. They need to understand you may be billed for snacks that cannot be claimed for reimbursement or extra snacks being distributed. They need to understand that the information provided on the rosters and After School Book is being provided to the School Nutrition Program so they may receive funds from the Federal Government. They should understand any misrepresentation may subject them to prosecution under applicable State and Federal statutes.**

Signature: \_\_\_\_\_  
(Person Requesting to participate in the After School Snack Program and providing training)

The Signature(s) Below is/are the Designated Persons Responsible for Implementing the Program Guidelines at Each Site. They are the ones responsible for accurate rosters and distribution of snacks.

Date Trained	Location of After School Program	Signature	Signature of Designee if Absent

A signed copy of this form must be returned to the School Nutrition Department for the program to continue to receive snacks.

## Reimbursable After School Snack Procedures 2023 – 2024 School Year

1. In order for a site to be eligible to participate in a reimbursable After School Snack Program, the program must:
  - ⇒ Consist of a supervised program
  - ⇒ The program should provide children with scheduled educational or enrichment activities
2. The program coordinator should inform the cafeteria manager when the number of participants decreases or increases so the number of snacks can be adjusted. Accurate counts are important to prevent a loss to the program.
3. The After School Program Site Supervisor responsibilities include:
  - ⇒ Maintain an attendance roster which indicates the children who were in attendance in the program each day
  - ⇒ Maintain a participation roster which indicates the children who took a complete snack. Attached is a sample of the participation roster which should be used. This roster should be given to the Cafeteria Manager. Participants should be checked off on the participation roster when they receive their snack – the person distributing the snack acts as the cashier and checks off the child at the point of them actually receiving the snack. It is possible to have more students in attendance than who participate in the snack program.
  - ⇒ Children are eligible to receive one complete snack. If extra snacks are left, they must be returned to the cafeteria.
  - ⇒ Follow the snack menu and serve all components in required portions to the children which choose to receive a snack. In order to receive reimbursement, all components must be given to the child. The School Nutrition Department cannot claim reimbursement for partial snacks. Example 1: If 15 snacks are requested, and the menu is muffin and milk; 15 children take the muffin and only 12 took the milk, then 3 of these snacks are incomplete and cannot be claimed for reimbursement. *Children must take all items on the menu.* If students do not want to participate they do not have to, but they can't receive part of the snacks offered. They may choose to bring a snack from home or they may choose to participate in the program, and once they have been checked off the roster, they may share the part of the snack they do not care for with another child. Example 2: If the program request 65 snacks, only 55 attend, then 10 complete snacks should be returned to the cafeteria.
  - ⇒ Handle snacks in a sanitary and safe manner. Return leftovers to the cafeteria.
  - ⇒ Inform the cafeteria if any child has medically documented allergies and needs a different snack than is listed on the menu.
4. Adults are not to receive a snack. If a child does not want an item, they may not give it to an adult. If there are extra items, they are to be returned to the cafeteria, not given away to adults or children.
5. Any partial snacks served that do not meet reimbursement requirements may be billed to your program. Any extra snacks served rather than returned to the cafeteria may be billed to your program.
6. Managers are required to keep all records, rosters, etc. and must be maintained for 3 years and 3 months.
7. School Nutrition Supervisors will monitor the program throughout the year.

## AFTER SCHOOL PROGRAM ROSTER

**GROUP:** \_\_\_\_\_ **WEEK:** \_\_\_\_\_ **2023/2024**

NAME	PIN #	MON	TUES	WED	THURS	FRI

Signature of Person Responsible for Meal Counts: \_\_\_\_\_

The certification information must be signed each day. By signing the certification information on the attached page, you are indicating the above information on the roster is accurate and true.

Manager's Signature: \_\_\_\_\_ Date Site Visited: \_\_\_\_\_