

Child and Adult Care Food Program
ELIGIBILITY DATA SUMMARY

ELIGIBILITY DATA for FY10

The Enrollment in our Child and Adult Care Food Program is based on the family size and income scales which are effective July 1, 2009 through June 30, 2010 is:

Free:	_____
Reduced	_____
Paid	_____
Total	=====

Based on a one month study covering the period:

From: Through:

I certify that I have received the CACFP Regulations, and guidance materials* from the State Department of Education explaining the criteria for eligibility and the instructions for reporting enrollment data. I fully understand these requirements and instructions and have retained the necessary documentation to support the above data. In addition, I certify that the above information is true and correct. I understand that this information is being given in connections with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.

NAME OF CACFP PROGRAM

DATE

SIGNATURE

*Guidance materials received include the: Income Eligibility Guidelines (effective July 1, 2009 to June 30, 2010); Application for Free or Reduced-Price Meals, Required Parent Letter, Instructions for Reporting Enrollment; Checklists (3) for Approving Free & Reduced-Price Meals, Child and Adult Care Food Program Application for Free and Reduced-Price Meals Requirements, and Questions and Answers About the 30-day Enrollment/Attendance Study.

Child and Adult Care Food Program Enrollment Roster		30 Day Time Period Covered by Enrollment Study				
		From:		To:		
		Participant Number				
Name of Site:		Claiming Categories			Date Income Statement Signed by Parent	Date Childs Enrollment Terminated
Number	Childs Name	Free	Reduced	Paid		
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Child and Adult Care Food Program Enrollment Roster		30 Day Time Period Covered by Enrollment Study				
		From:		To:		
		Participant Number				
Name of Site:		Claiming Categories			Date Income Statement Signed by Parent	Date Childs Enrollment Terminated
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