

Community Eligibility Provision

Assurance Regarding Implementation of the Community Eligibility Provision – SY 2021-22



Sponsor Name <hr/>	Sponsor Number <hr/>
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Declaration:

National School Lunch Program and School Breakfast Program: Eliminating Applications through Community Eligibility as required by the Healthy, Hunger-Free Kids Act of 2010 amends the eligibility regulations for free and reduced-price meals under the National School Lunch Program (NSLP) and School Breakfast Program (SBP) to codify the statutory provision that establishes the Community Eligibility Provision. This provision is a reimbursement option for eligible local educational agencies (LEAs) and schools that wish to offer free school meals to all children in high poverty schools without collecting household applications.

The LEA may implement this provision by district, group of schools, or for an individual school. If the LEA chooses to implement this provision, the schools selected must serve free lunches and breakfasts to all students and cover with non-federal funds any costs of providing free meals to all students that exceed the federal reimbursement. Claiming percentages derived from the identified student percentage (ISP) would be used to claim free and paid student meals.

The food service director (1), free and reduced determining official (2), and claim preparer (3) employed by the above-named district/agency are choosing to implement this provision and agree to comply with the following procedures (each staff person, please initial each statement):

1. _____, _____, _____: I have read and understand the above information related to the CEP.
2. _____, _____, _____: In choosing to implement this provision, I understand it must be implemented for both breakfast and lunch meal service (pending program participation).
3. _____, _____, _____: The LEA agrees to submit accurate ISP data as of April 1st of the prior school year, to the state agency, by April 15th of that same year.
4. _____, _____, _____: All affected households will receive prior notification that the LEA is operating CEP.
5. _____, _____, _____: The LEA agrees to serve all children in the participating schools(s) free breakfasts and free lunches⁸ (pending program participation) for four successive school years.



6. _____, _____, _____: The LEA must have a percentage of identified students as of April 1st of the prior year that is greater than or equal to 40%.
7. _____, _____, _____: The LEA agrees to pay with funds from non-federal sources the difference between the cost of serving lunches and breakfasts at no charge to all participating children and federal reimbursement.
8. _____, _____, _____: Claiming percentages submitted to the state agency would be based on free and paid claiming percentages derived from the identified student percentages and a multiplier factor.
9. _____, _____, _____: The calculated claiming percentages used in Year 1 would be valid for the 4-year CEP cycle unless a new ISP is recalculated in years 2, 3, and 4 and reported to the state agency.
10. _____, _____, _____: The LEA will update its policy statement to reflect participation in the CEP.
11. _____, _____, _____: The Verification sample will not include any applications from any school participating in the CEP.
12. _____, _____, _____: The LEA will not distribute applications, and districts must complete the Family Economic Data Survey with resources outside of the school food service authority.
13. _____, _____, _____: Direct certification for all students will be completed at least once per year, by October of that school year.

By signing below, I agree that the above requirements are being followed, and I confirm that the LEA listed above will be implementing this provision.

	Food Service Director	Determining Official (If same as the Food Service Director, enter "same.")	Claim Preparer (If same as the Food Service Director or Determining Official, enter "same.")
Print Name:			
Signature:			
Date:			
CDE Internal Use Only			
CDE Staff	CEP Program Consultant	Free and Reduced Program Consultant	School Nutrition Unit Director
Print Name:	Benjamin Wetherbee	Benjamin Wetherbee	Brehan Riley
Signature:			
Date Approved:			