

1. SPONSOR AGREEMENT NUMBER (RCDT Code)
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ILLINOIS STATE BOARD OF EDUCATION

Nutrition Programs
 100 North First Street, W-270
 Springfield, Illinois 62777-0001
 800/545-7892—217/782-2491
 TTY: 217/782-1900

**PROGRAM PARTICIPATION REQUEST FORM FOR
 SCHOOL-BASED CHILD NUTRITION PROGRAMS**

Documentation to be submitted with form.

- Internal Revenue Service (IRS) Form W-9 with signature of SFA authorized representative
- Copy of 501(c)(3) federal IRS letter of tax-exempt status (non-public entities only)

Mail to: Illinois State Board of Education
 Nutrition Programs
 100 North First Street, W-270
 Springfield, Illinois 62777-0001

Contact us:
 800-545-7892 (Illinois only)
 217-782-2491
 E-mail: cnp@isbe.net

2. NAME OF SCHOOL FOOD AUTHORITY (SFA)

ADDRESS	Street		
	City	State	Zip Code

3. SFA FAX NUMBER

4. NAME OF SFA AUTHORIZED REPRESENTATIVE (First, M.I., Last) *(Must be the same person signing the application.)*

POSITION	SFA TELEPHONE (Include Area Code)	Extension
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5. NAME (First, M.I., Last)

CONTACT	ADDRESS Street		
	City	State	Zip Code
	TELEPHONE (Include Area Code)	FAX NUMBER (Include Area Code)	E-MAIL

6. TYPE OF SFA

- | | | |
|---------------------------------|---|---|
| <input type="checkbox"/> School | <input type="checkbox"/> Day School and Residential Institution | <input type="checkbox"/> Residential Institution |
| <input type="checkbox"/> Camp | <input type="checkbox"/> Boarding School | <input type="checkbox"/> Day Care Center/Homeless Shelter |

7. TAX STATUS

- Public Private Nonprofit

Private nonprofit organizations must have federal tax-exempt status under Section 501(c)(3) of the Internal Revenue Code of 1986 as amended.

CERTIFICATION STATEMENT

The school food authority hereby certifies that the foregoing is true and correct and that it will comply with all the rules and regulations governing participation in the program(s) for which application is made, including the competitive food policy regarding the sale of food during the regularly scheduled lunch and breakfast service.

_____ Date

_____ Original Signature of SFA Authorized Representative

_____ Position

ISBE USE ONLY

_____ Date

_____ Signature of Division Administrator, Nutrition Programs

Instructions for Program Participation Request Form for School-Based Child Nutrition Programs (ISBE Form 54-42) (New Applicants)

Item 1

The sponsor agreement number is the district/school region-county-district-type (RCDT) code which is an 11-digit number (## - ### - ##### - ##) assigned to schools registered with the Illinois State Board of Education. If your entity has not been assigned an RCDT code, please leave this item blank.

Items 2–3

Provide the school food authority (SFA) name, street address, city, state, zip code, and fax number.

Item 4

List the name, position title, and phone number, including the extension, of the authorized representative of the SFA. The authorized representative must be the person who is financially and legally responsible for the administration of the Child Nutrition Programs and must be an employee of the SFA or a member of the school board. The authorized representative must be the same person who signs the Program Participation Request Form.

Item 5

Provide the name of the contact person at the SFA who can answer questions regarding the Program Participation Request Form and indicate the address, phone and fax numbers, and email address of the contact person.

Item 6

Place an X in the appropriate box that describes your SFA. Definitions of the types of SFAs are:

School: *An educational unit of high school grade or under, recognized as part of the educational system in Illinois and operating under public or nonprofit private ownership in a single building or complex of buildings.*

Combination Day School/Residential Child Care Institution: *A residential child care institution that also provides educational services to day students.*

Camp: *A temporary residential camp that offers a regularly scheduled food service as part of an organized program for enrolled children.*

Boarding School: *A school in which children are primarily taught branches of education corresponding to those taught in public school, grades one through 12, or taught in public elementary schools, high schools, or both elementary and high schools that operate on a regular academic school-year basis.*

Residential Child Care Institution: *Any public or nonprofit private residential child care institution that operates principally for the care of children and, if private, is licensed to provide residential child care services under the appropriate licensing code. Residential child care institutions include homes for the mentally, emotionally, or physically impaired; unmarried mothers and their infants; group homes; halfway houses; orphanages; temporary shelters for abused children and runaway children; long-term care facilities for chronically ill children; and juvenile detention centers.*

Day Care Center/Homeless Shelter: *A public or nonprofit private residential child care institution that operates principally for the care of children. A day care or homeless shelter is eligible to participate in the Special Milk Program only and may not participate in any other federally subsidized meal service program authorized under the National School Lunch Act.*

Item 7

Indicate the tax status of the SFA. If this is a private nonprofit facility, submit a copy of the tax-exempt letter showing status under Section 501(c)(3) of the Internal Revenue Code of 1986 as amended.

Public: *A tax-supported school.*

Private Nonprofit: *School or institution exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.*

Certification Statement

The dated signature of the SFA authorized representative is required. By signing the Program Participation Request Form, the SFA agrees to operate in compliance with applicable program rules and regulations.

Mail the completed forms to:

Illinois State Board of Education
Nutrition Programs
Attn: Lindsay Blough
100 North First Street, W-270
Springfield, Illinois 62777-0001