



NUTRITION AND WELLNESS PROGRAMS DIVISION

Federal regulation 7CFR Part 225.14 (c)(1) requires each new institution applying for participation in the Summer Food Service Program to submit information sufficient to document that the institution is **financially** and **administratively capable** of operating the SFSP, and accepts final financial and administrative responsibility for total program operations. To document this, the new institution must demonstrate in its application it is viable, capable, and accountable of operating in conformance with the following program requirements. The State agency must only approve applications that meet these program requirements, and must deny the applications of those new institutions that do not meet these program requirements or who submit fraudulent information or documentation when applying for program participation.

NAME OF SPONSORING ORGANIZATION

PHYSICAL ADDRESS OF SPONSORING ORGANIZATION (Street, City, State, Zip Code)

MAILING ADDRESS (If different from physical address) (Street, City, State, Zip Code)

To complete the form you may indicate "Yes," "No" or "N/A" (not applicable). Questions that are greyed out require a response via an attached document or documents. All questions must be completed for your application to receive full consideration.

Financial Capability

A new institution must demonstrate it has adequate financial resources to operate the SFSP on a daily basis, has adequate sources of funds to withstand temporary interruptions in SFSP payments and/or fiscal claims against the institution, and can document financial viability through audits or financial statements.

Yes No N/A

- 1. **Submit your organization's most recent independent audit report.** If no audits have been performed, submit financial statements (Balance Sheet and Income Statement) prepared by an accountant. Comprehensive financial statements must show all expenditures and sources of income or other funding relevant to the proposed activity. **ATTACH REQUIRED DOCUMENTS.**
- 2. What date did your organization open for business? _____
- 3. Describe all programs the organization conducts other than the SFSP and the length of time the activities have been in operation. **RESPOND VIA AN ATTACHED DOCUMENT.**
- 4a. Describe all revenue sources available to the organization besides SFSP reimbursement. Include details to the source, frequency, nature (tuition, subsidized child care benefits, Head Start funding, earned income, grants, and donations), function or purpose, length of time this revenue has been available, and amount of the revenue. **RESPOND VIA AN ATTACHED DOCUMENT.**
- 4b. Do you expect the level, function, or nature of the funding to change in the coming fiscal year? If so, what impact will it have on the organization? **ATTACH ADDITIONAL DOCUMENTS IF NEEDED.**
- 4c. What are the names of the other Federal agencies providing assistance to your organization? **RESPOND VIA AN ATTACHED DOCUMENT.**
- 4d. Has your organization ever been found to be in non-compliance by any of these Federal agencies? **ATTACH ADDITIONAL DOCUMENTS IF NEEDED.**

Financial Capability (Continued)

Yes No N/A

5. Will this revenue be available to operate the SFSP on a daily basis and, if necessary, withstand temporary interruptions in SFSP payments and/or fiscal claims against the institution?
6. If you are a potential multi-site sponsoring organization, provide the geographic area covered. (**Complete only if you have multiple sites.**)
7. If you are a potential sponsoring organization of multiple sites, identify other sponsoring organizations in the area. Explain why your organization needs to provide services to these sites in an area when there are other sponsoring organizations already providing the SFSP in this geographic area.

Administrative Capability

The new institution must be administratively capable. Appropriate and effective management practices must be in effect to ensure the SFSP operates in accordance with this standard.

Yes No N/A

8. Have you or any of your institution's principals (including managers, officers, and all members of the board of directors) administered a Child Nutrition Program in the last seven years?
9. List the name(s) of the institutions that you currently or previously administered that participated in a Child Nutrition Program within the last 7 years.
10. Have you or any of the institution's principals been declared seriously deficient in the last seven years?
11. Have you or any of the institution's principals been disqualified from any federal program in the last seven years?

Program Accountability

New institutions must have internal controls and other management systems in effect to ensure fiscal accountability and to ensure the SFSP will operate in accordance with requirements.

Yes No N/A

12. What type of financial system do you use? **CHECK ONE ONLY**
 Manual Records Computer Program
13. How do you ensure the Generally Accepted Accounting Principles (GAAP) are followed?

14. Do you hire a Certified Public Account (CPA) to assist with year-end financial preparation and tax reporting?
15. Are your procedures and internal controls documented in a procedures manual?
16. Does your procedures manual include fiscal integrity and accountability for all SFSP receipts, disbursements, expenses, and assets?
17. Do you have safeguards and controls to prevent and detect improper financial activities by employees?

Governing Board of Directors

Developing an Appropriate Board of Directors – An acceptable Board consists of a majority of the members whose livelihood is independent from and who holds no personal fiscal interest in the institution’s activities and who are not related to each other or to its personnel. Board members must recuse themselves from voting on decisions relating to their own compensation and that of immediate family members and financially related parties. **Provide responses to the following with attached documents.**

Yes No N/A

- 18. List the name and mailing address for each board member and officer. Identify and describe in detail the responsibilities and degree of involvement of the board of directors. **RESPOND VIA AN ATTACHED DOCUMENT.**
- 19. What is the length of a board member’s term? **RESPOND VIA AN ATTACHED DOCUMENT.**
- 20. How are the board members selected and/or elected? Describe the criteria used when selecting board members. **RESPOND VIA AN ATTACHED DOCUMENT.**
- 21. What is the board’s role in approving fiscal actions, policy decisions, and administrative issues such as salaries, large purchases, and personnel decisions? **RESPOND VIA AN ATTACHED DOCUMENT.**
- 22. Explain any relationships between board members and individuals involved in the operation of your organization’s activities. **RESPOND VIA AN ATTACHED DOCUMENT.**
 - a. How do you ensure board members do not have a conflict of interest (i.e., not financially interested in these activities)?
 - b. Are board members independent to personnel in the organization or to each other? If no, please explain.
- 23. How do you ensure board members are recruited from other areas in the community? **RESPOND VIA AN ATTACHED DOCUMENT.**
- 24. Will board members oversee the SFSP and be made aware of activities and allowable spending of federal funds? **RESPOND VIA AN ATTACHED DOCUMENT.**

Checklist – a complete Viability, Capability, and Accountability Profile includes:

- Completed VCA Profile (ISBE 67-30)
- A copy of the organization's most recent audit or financial statements, to include an income statement and balance sheet, prepared by an accountant (As instructed in #1).
- Additional attachments, when applicable, for questions #3, #4a, #4b, #18.

Return completed documents to:
Illinois State Board of Education
Nutrition and Wellness Programs Division
100 North First Street, W-270
Springfield, Illinois 62777-0001
800-545-7892
217-524-6124 (Fax)

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- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) E-mail: program.intake@usda.gov.

This institution is an equal opportunity provider.