

Arkansas FY 2020 NSLP Equipment Assistance Grant Application and Checklist

The entire application packet must be complete and submitted via

email to CNU.CustomerService@arkansas.gov

<u>OR</u>

mail to

Attn: NSLP Equipment Assistance Grant

Arkansas Department of Education,

Division of Elementary and Secondary Education,

Child Nutrition Unit

2020 West 3rd Street, Suite 404

Little Rock, AR 72205

Checklist:

- □ Applicant Information Completed
- □ Applicant Authorization and Certification Initialed
- □ Summary of Grant Funds Requested Completed and Signatures
- □ Scoring Criteria Form Completed (if this is not completed, your application will be void)
- **Equipment Specifications**
- □ Bid Quotes (2 or more)
- □ Justification for equipment



Applicant Information

District Name:		
County:		
1 Piece of Equipment Requested:		
Total Amount Requested (>\$1,000):		
School Name and LEA # for Grant Request:		
School Physical Address:		
General Business Manager Name, Phone Number, Email:		
Has the <u>district</u> received a NSLP Equipment Grant previously?	YES	NO
Has the <u>school</u> received a NSLP Equipment Grant previously?	YES	NO

Funding will be awarded on a point system evaluating the criteria listed on the Scoring Criteria Form. In some cases a LEA grant request may not be fully funded due to remaining fund balance and score. In this event, the State Agency will contact the district with the estimated partial fund.

Will the LEA accept partial funding for the piece of equipment requested on the application?

YES NO



Applicant Authorization and Certification

Please read in full and initial at the bottom.

- 1. Ensure open and free competition for equipment purchasing.
- 2. Ensure food service employees are properly trained on operation, safe use, and cleaning of equipment.
- **3**. Ensure instruction manual(s) are placed in kitchen work area, Food Service Managers office, and/or Child Nutrition Directors office.
- 4. Not submit paid invoice or pay for equipment until equipment is deemed functional and operational by LEA and/or Child Nutrition Director or Manager.
- 5. Assume financial obligation for appropriate utilities (gas, water, electricity, etc.) within three feet of equipment. *Installation costs within three feet are reimbursable as part of grant award, with acceptable documentation.
- 6. Ensure on time response to CNU data and report requests based on USDA requirements.
- 7. Maintain up-to-date equipment inventory with all appropriate and applicable amortization schedule.
- 8. Ensure that funds are expended in accordance with the LEA's approved application by the deadline of Friday, May 14, 2021 (see page 5 of the instructions for the full award and report timeline).

The applicant hereby applies for the 2020 NSLP Equipment Assistance Grant funds available under the Consolidated Appropriations Act 2020. The LEA agrees to comply with all provisions thereof and with any instructions or procedures issued in connection with accepting Federal funds in accordance with applicable regulations. The applicant assures that the NSLP Equipment Assistance Grant will be administered and implemented in compliance with all applicable statues, regulations, and policies related to approved award (see pages 6-7 of the Instructions for this list).

Superintendent Initial Child Nutrition Director Initial Business Manager Initial



Summary of Grant Funds Requested

Complete and Attach Documentation

School LEA Number	School Site	Equipment Requested	Total Cost

- 1. **Attach** bid specifications (this is what you want in the piece of equipment and was also sent to the companies to obtain price quotes. Please refer to the bid specification regulations to ensure compliance.)
- 2. **List at least two** (or more) names of manufacturers, equipment companies, etc. that have provided cost estimates for the piece of equipment requested and **attach** the documentation.

Company 1.	Company 2.

3. **Attach** the justification for the equipment requested. This must address the focus area(s) checked for the piece of equipment applied for (see pages 3 - 4 of Instructions.)

TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DUL Y AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH ALL ASSURANCES (LISTED IN INSTRUCTIONS AND APPLICATION) IF THE ASSISTANCE IS AWARDED.

Signature of Superintendent

Signature of Child Nutrition Director

Signature of General Business Manager



Fiscal Year 2020 Arkansas NSLP Equipment Assistance Grant Scoring Criteria Form

This must be completed or the application will be void

Please check all that apply: **Focus Area of the Equipment:**

Nutrition and Quality	(150 Points)	Maximum Points:
Food Safety	(100 Points)	150
Supports the establishment,	(50 Points)	
maintenance, or expansion		
of the School Breakfast Progra	m	
Convenience and Appeal	(50 Points)	
Energy Efficiency	(25 Points)	
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Age of Equipment:

1-5 Years Old	(10 Points)
6-10 Years Old	(20 Points)
11-15 Years Old	(30 Points)
16-20 Years Old	(40 Points)
Over 20 Years Old	(50 Points)
Do not have this equipment	(50 Points)

Percentage of Students Eligible for Free and Reduced Price Meals or CEP Claiming % at the Applying School:

□ 0-49.9%	(30 points)	Maximum Points:
□ 50-59.9%	(50 points)	150
□ 60-69.9%	(70 points)	
□ 70-79.9%	(90 points)	
□ 80-89.9%	(120 points)	
□ 90-99.9%	(150 points)	

Programs Administered by the Applying School in SY 19-20

National School Lunch Program	(30 Points)	Maximum Points:
School Breakfast Program	(30 Points)	100
Afterschool Snack Program Summer Feeding Program	(20 Points) (20 Points) (20 Points)	

<u>To be Completed by the Child Nutrition Unit:</u> Geographic Unemployment Economic Data

0-2.9%	(10 Points)	7-7.9%	(60 Points)	Maximum Points:
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3-3.9%%	(20 Points)	8-8.9%	(70 Points)	100
4-4.9%	(30 Points)	9-9.9%	(80 Points)	
5.5-9%	(40 Points)	Over 10%	(100 Points)	
6-6.9%	(50 Points)			

Total Points: ____

This institution is an equal opportunity provider.

Maximum Points: 50