

Fresh Fruit and Vegetable Program Application Certification

District Name: _____

School Name: _____

We have reviewed the application and attest to the accuracy of the information provided. If selected, we agree to implement the FFVP as outlined above in a manner consistent with the policies and procedures established by the USDA and outlined in the USDA *Fresh Fruit and Vegetable Program Handbook*. Furthermore, we agree to participate in any USDA sponsored evaluations and to provide requested information by the specified deadlines.

Please provide the contacts below or equivalent positions. All four signatures are required. This 2 page document MUST be uploaded to the Colyar System with the Site Application. Digital signatures will be accepted.

Site Kitchen Manager

_____ <i>Name (Print)</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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School Principal

_____ <i>Name (Print)</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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Food Service Director

_____ <i>Name (Print)</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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District Superintendent

_____ <i>Name (Print)</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-941*
- (2) fax: (202) 690-7442*
- (3) email: program.intake@usda.gov.*

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