

Updating the Sponsor Application for School Nutrition Programs

School Year 2026-27



Connecticut State Department of Education
Bureau of Child Nutrition Programs
450 Columbus Boulevard, Suite 504
Hartford, CT 06103-1841

Revised September 2026

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/document/s/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: program.intake@usda.gov

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This guide applies only to sponsors of the National School Lunch Program (NSLP), including the Afterschool Snack Program (ASP), School Breakfast Program (SBP), and Special Milk Program (SMP). All sponsors must submit their agreement for Child Nutrition Programs online, using the Connecticut State Department of Education's (CSDE) Online Application and Claiming System for Child Nutrition Programs (CNP System). The sponsor's online application must be approved by the CSDE before sponsors can submit any reimbursement claims for the current school year. The CSDE strongly encourages all sponsors to complete their online agreement by **September 12, 2026**, to ensure timely approval and claims submission.



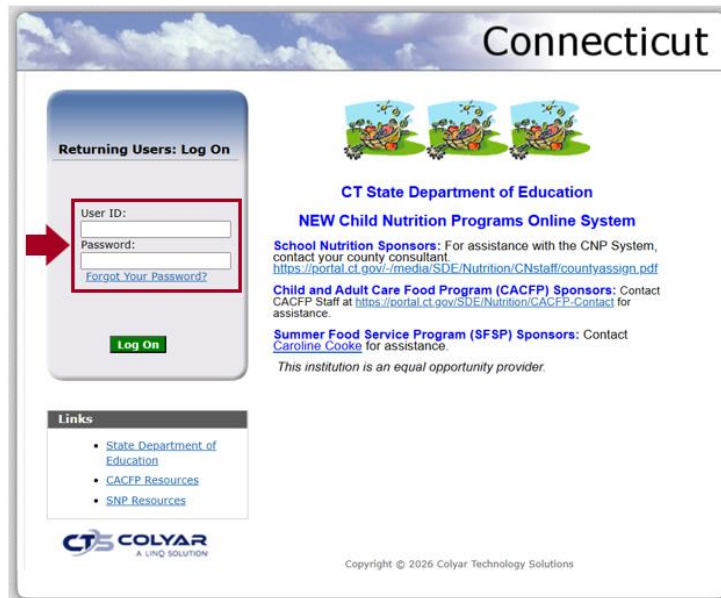
CSDE Contact Information for School Nutrition Programs Staff

For questions regarding the NSLP, SBP, and ASP, please contact the school nutrition programs staff in the CSDE's Bureau of Child Nutrition Programs. The CSDE's resource, [County Assignments for School Nutrition Programs](#), indicates each Connecticut county's assigned CSDE school nutrition team member who provides technical assistance for the USDA school nutrition programs.

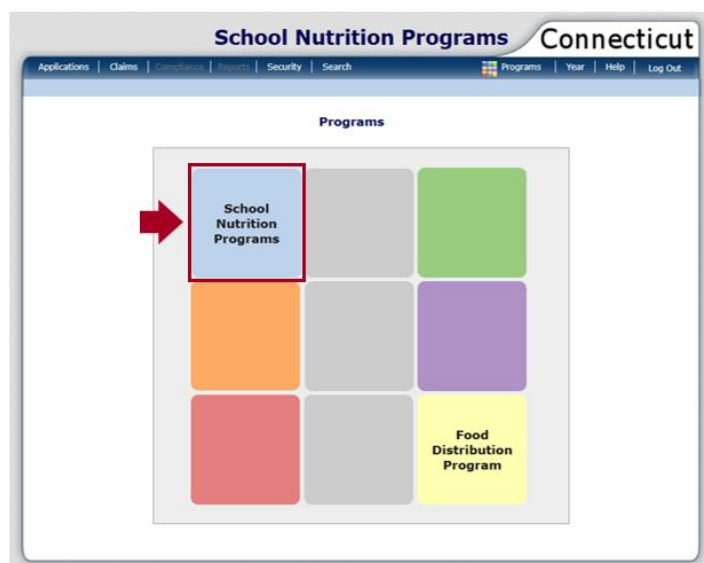
For a list of all CSDE Child Nutrition Programs staff, refer to the CSDE's resource, [Child Nutrition Staff and Responsibilities](#)..

1 — Updating Sponsor Agreement

1. Access the Connecticut State Department of Education's (CSDE) Online Application and Claiming System for Child Nutrition Programs (CNP System) at <https://ct.cnpus.com/prod/Splash.aspx>.



2. Log in with **User ID** and **Password**.
3. Click on **School Nutrition Programs**.

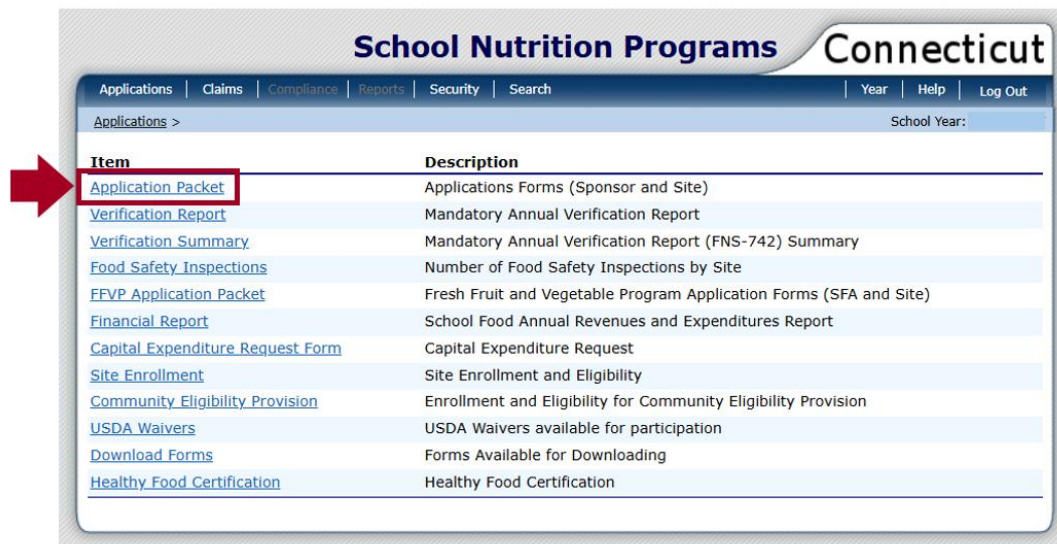


1 | Updating Sponsor Agreement

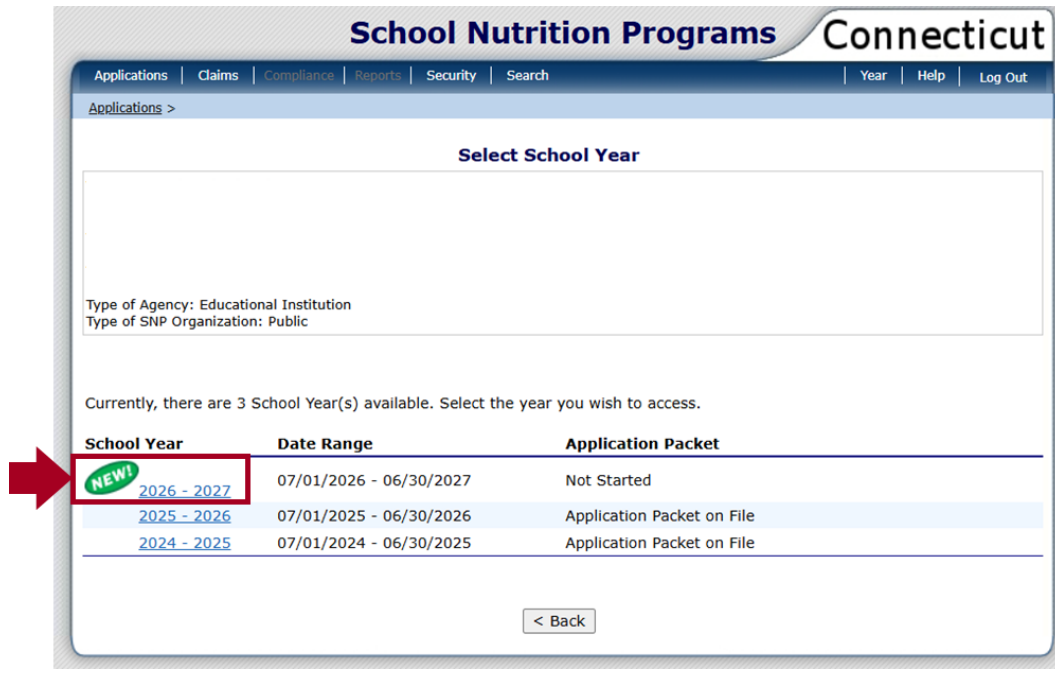
4. Click on **Applications**.



5. Click on **Application Packet**.



- Click on school year **2026-27**.



School Nutrition Programs Connecticut

Applications | Claims | Compliance | Reports | Security | Search | Year | Help | Log Out

Applications >

Select School Year

Type of Agency: Educational Institution
Type of SNP Organization: Public

Currently, there are 3 School Year(s) available. Select the year you wish to access.

School Year	Date Range	Application Packet
NEW! 2026 - 2027	07/01/2026 - 06/30/2027	Not Started
2025 - 2026	07/01/2025 - 06/30/2026	Application Packet on File
2024 - 2025	07/01/2024 - 06/30/2025	Application Packet on File

< Back

- Click on **Enroll**, then **OK**. (This step may have already been completed as part of the completion of the Healthy Food Certification process).



School Nutrition Programs Connecticut

Applications | Claims | Compliance | Reports | Security | Search | Year | Help | Log Out

Applications > Application Packet > School Year: 2026 - 2027

2026 - 2027 Application Packet

Packet Submitted Date:
Packet Approved Date:
Packet Original Approval Date:
Packet Status:

Type of Agency: Educational Institution
Type of SNP Organization: Public

The Sponsor has not started in the current year (2027).

Click 'Enroll' to enroll for this year based on your prior year's information.

Enroll Cancel

1 | Updating Sponsor Agreement

- The **2026-27 Application Packet** screen will appear. To the left of **Sponsor Application**, click on **Modify**.

School Nutrition Programs Connecticut

Applications | Claims | Compliance | Reports | Security | Search | Year | Help | Log Out

Applications > Application Packet > School Year: 2026 - 2027

2026 - 2027 Application Packet

Packet Submitted Date:
Packet Approved Date:
Packet Original Approval Date:
Packet Status: Not Submitted

Type of Agency: Educational Institution
Type of SNP Organization: Public

Action	Attention	Form Name	Latest Version	Status
Modify	➔	Sponsor Application	Original	Pending Validation
	➔	Community Eligibility Provision (CEP) Schedule		Site Eligibility Missing
Details		Checklist Summary		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/Closed	Error	Total Applications
School Nutrition Program	0	7	0	0	0	0	7
Seamless Summer Option	0	0	0	0	0	0	0

[Show Packet History](#) [Back](#) [Submit for Approval](#) [Withdraw Packet](#)

The **sponsor application** will open. Most of the information entered in the school year 2025-26 application will transfer over.

Business Administrator			
2. Name:	Salutation	First Name	Last Name
3. Email Address:			
4. Phone:		Ext:	Fax:
5. Title:			
Street Address			
6. Address Line 1:			
Address Line 2:			
7. City:			
8. State:	CT	Zip:	
9. County:			
Mailing Address			
☐ Same as the Street Address			
10. Address Line 1:			
Address Line 2:			
11. City:			
12. State:	CT	Zip:	
13. County:			
Child Nutrition Director			
☐ Same as the Business Administrator			
14. Name:	Salutation	First Name	Last Name
15. Email Address:			
16. Phone:		Ext:	Fax:

9. Check all information for accuracy and make edits and updates as necessary.

- The **Authorized Representative 1 and 2** must be completed.
- The **Hearing Official** must be completed.
- The **Direct Certification Contact** can be left blank if the sponsor is **not** required to use the Direct Certification List. (e.g., RCCI's who do not claim day students.)
- The **Determining Official** can be left blank if the sponsor does **not** process free and reduced applications.
- The **Verifying Official** can be left blank if the sponsor is **not** required to conduct verification.

All sponsors of the NSLP **must** complete the FNS 742 Verification Summary Report even if the process of verification is not required since free and reduced-price applications are not processed

1 | Updating Sponsor Agreement

10. For **Verification Method** (question 42), click on the type of verification method that the sponsor intends to use during school year 2026-27. Refer to the sponsor's school year 2025-26 Verification Report to determine what method should be used.

If the sponsor had a nonresponse rate of 20 percent or more for the verification results in school year 2025-26, then Standard Sample Size verification is required based on error-prone applications. If the sponsor does not collect applications and is not required to complete verification, choose **No Verification to be Performed**.

Verification Method

42. Which type of Verification Method do you intend to use?

☐ Standard

☐ Alternate I

☐ Alternate II

☐ No Verification to be Performed

- For information on the allowable types of verification methods, refer to page 101 of the USDA's [Eligibility Manual for School Meals](#).
11. For **Meal Count and Collection Procedures** (question 43), click **Yes** or **No**. All sponsors will be submitting documentation for site information on money collection and point of service (meal count) systems. For more information, refer to item 3 (Money Collection and POS Meal Count Systems) under "[checklist](#)."

Example:

Meal Count and Collection Procedures

43. Have your meal counting and claiming procedures at any of your sites been revised? ☐ Yes ☒ No

12. For **Eligibility Information** (questions 44-47), if the sponsor does not collect applications, click **No** for all items. If the sponsor does collect applications, answer questions 44-47 accordingly. For question 48, if any of the sponsor's sites are participating in the Community Eligibility Provision (CEP), click **Yes**. If none of the sponsor's sites participate in CEP, click **No**.

Example:

Eligibility Information		
44. Does your organization use the USDA/State prototype household application?	☐ Yes	☐ No
45. Does your organization use scanned applications?	☐ Yes	☒ No
46. Does your organization use online applications?	☐ Yes	☒ No
47. Are you using a computerized system for processing free and reduced applications?	☒ Yes	☐ No
If Yes, what is the name of your computerized system? QSP by Rediker Software		
48. Will any of your sites be participating in the Community Eligibility Provision (CEP) for the National School Lunch Program?	☐ Yes	☒ No

13. Questions 49-51 apply only to **residential child care institutions** (RCCIs). If the sponsor is not an RCCI, nothing can be clicked. If the sponsor is an RCCI, answer questions 49-51 accordingly.

Residential Child Care Institution (RCCI) only	
49. What is the student population type?	☐ Residential only ☐ Residential and day students
50. What documentation is used to qualify residential students for free meals?	☐ Individual Determination Form ☐ Other If Other, please describe:
51. What documentation is used to qualify day students for free and reduced price meals?	☐ Free and Reduced Price Application ☐ Other If Other, please describe:

1 | Updating Sponsor Agreement

14. For **Food Service Management Company (FSMC)** (question 52) click **Yes** or **No**. If **Yes** is clicked, complete the **Sponsor Contact for FSMC Contract**. This person is the Food Service Director's direct company manager (Area Manager or District Manager). For more information, refer to the steps for food service management companies in [section 5](#).

Food Service Management Company (FSMC)

52. Will the school nutrition program be managed by a Food Service Management Company (FSMC)? ☐ Yes ☒ No

Sponsor Contact for FSMC Contract

53. Name:

Salutation	First Name	Last Name

54. Email Address:

55. Phone:

Phone	Ext:	Fax:

56. Title:

15. For **Vended Meals**, answer questions 57-60 as applicable. **All contracts/interschool agreements will be submitted/uploaded into the CNP System.** For more information, refer to item 13 (Vended Meals Contract) under "[checklist](#)."

Vended Meals

57. Does your organization purchase meals from a School Food Authority (SFA)? ☐ Yes ☒ No
If Yes, please list the School Food Authority (SFA) name(s):
Do you have an agreement? ☐ Yes ☒ No

58. Does your organization purchase meals/snacks from a vendor other than a School Food Authority (SFA)? ☐ Yes ☒ No
If Yes, please list the vendor name:
Do you have a contract? ☐ Yes ☒ No

59. Does your organization claim reimbursement for meals provided to a School Food Authority (SFA)? ☐ Yes ☒ No
Do you have an agreement? ☐ Yes ☒ No

60. Does your organization vend meals to a School Food Authority (SFA)? ☐ Yes ☒ No
If Yes, please list the School Food Authority (SFA) name(s):

16. For **Certification**, click the **check box** and then click on **Save**.

Certification

 ☐ I hereby certify that neither the Sponsor nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

I certify under penalty of perjury that the information on these application forms is true and correct, and that I will immediately report to the State any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of federal funds. The State may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable federal and state criminal statutes.

On behalf of the Sponsor, I hereby agree to comply with all state and federal laws and regulations governing the Child Nutrition Programs administered by the State. In accordance with Federal law and U.S. Department of Agriculture policy, this Sponsor does not discriminate on the basis of race, color, national origin, sex, age or disability. I will ensure that all monthly claims for reimbursement are true and correct and that records are available to support these claims.

 **Save** Cancel

17. Click on **Finish**. The **Sponsor Application** is now complete. The **Site Application** section must now be completed (refer to [section 2](#)).

SNP Sponsor Application
For School Year:

Type of Agency: Educational Institution
Type of SNP Organization: Public

The Application has been saved.

 **Finish**

2 — Updating Site Agreements

1. To start the **Site Application**, click on **School Nutrition Programs**.

Application Packet

Packet Submitted Date:
 Packet Approved Date:
 Packet Original Approval Date:
 Packet Status: Not Submitted

Type of Agency: Educational Institution
 Type of SNP Organization: Public

[Packet Assigned To:](#) unassigned

Action	Attention	Form Name	Latest Version	Status
View Modify Admin		Sponsor Application	Original	Not Submitted
Details		Meal Pattern Compliance Dashboard		Pending Validation
Details	➔	Checklist Summary (12)		
Details		Application Packet Notes		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	1	0	0	0	0	1
Seamless Summer Option	0	0	0	0	0	0	0

2. Click on **Modify** to the left of the **Site Name**.

Action	Site ID / Site Name	NSLP	SBP	ASCP	SMP	FFVP	Version/ Status
	Totals	1	1	0	0	0	
View Modify	01 School	X	X				Original / Pending Validation

2 | Updating Site Agreements

3. The **SNP Site Application** screen will appear for the school that was selected. Most of the information entered in the school year 2025-26 application will transfer over. **Please check all information for accuracy and make edits and updates as necessary.**

Review the selected **Program Information** and make updates as necessary.

Note: If the sponsor is adding a new site or program for school year 26-27, please consult with the sponsor's CSDE school nutrition team member. Additional information may need to be submitted before the site can be approved (refer to "[CSDE Contact Information for School Nutrition Programs Staff](#)" in this document).

VIEW | MODIFY

SNP Site Application
For School Year:

Type of Agency: Educational Institution
Type of SNP Organization: Public

Version: Original

Program Information

Modify Program Selection

Participating Program(s)

☒	A. National School Lunch Program	(NSLP)	CFDA #10.555
☒	B. School Breakfast Program	(SBP)	CFDA #10.553
☒	C. Afterschool Snack Program	(ASP)	CFDA #10.555
☐	D. Special Milk Program	(SMP)	CFDA #10.556

Site Contact

1. Name:

Salutation

First Name

Last Name

- Update the **Site Contact** information as applicable. Review the **Street Address** and update as necessary.

Site Contact			
1. Name:	Salutation	First Name	Last Name
2. Email Address:			
3. Phone:		Ext:	Fax:
4. Title:			
Street Address			
5. Address Line 1:			
Address Line 2:			
6. City:			
7. State:		Zip:	
8. County:			

- Review the **Participation Information** and update as necessary.

10. Select Grades at this site: (Check all that apply)			
Early Education:	☐	1st grade:	☒
Head Start:	☐	2nd grade:	☒
Pre-Kindergarten:	☒	3rd grade:	☒
Kindergarten:	☒	4th grade:	☒
5th grade:	☒	6th grade:	☒
7th grade:	☒	8th grade:	☒
9th grade:	☐	10th grade:	☐
11th grade:	☐	12th grade:	☐
11. Select Site Category:			
12. Attendance Factor:			
13. Kitchen Type:			
If Combination, identify which types:			

- The **Attendance Factor (AF)** is the percentage of students present on any given day, averaged over a month. Calculate the AF using the formula below:

A = Enrollment multiplied by days in the month

B = Total absences for the month

$$\frac{A-B}{A} \} \text{ AF Formula}$$

2 | Updating Site Agreements

6. Review the **Pricing Information** and update the paid, reduced and adult price as necessary.

- **Sites participating in the Community Eligibility Provision** must select “Non-Pricing – CEP” for the NSLP and SBP.

Pricing Information

14. **PRICING:** Insert prices charged for each program in which this site will participate (e.g. if the full price for lunch is \$2.00, insert 2.00 under NSLP and in the column next to Paid).

NON-PRICING: Select if students will not be charged for meals.

REDUCED CHARGE WAIVED: Only paid students and adults are charged for meals.

NOTE: The maximum charge for reduced-price meals is \$0.40 for lunch, \$0.30 for breakfast, and \$0.15 cents for snacks. Do not enter dollar signs in the meal pricing fields.

Meal Type	Pricing Information	Paid Price	Reduced Price	Adult Price
National School Lunch Program (NSLP)	Non-Pricing - CEP			4.25
School Breakfast Program (SBP)	Non-Pricing - CEP			2.00
Afterschool Snack Program (ASP)				

- **Sites with a pricing program** must select “Pricing” for the NSLP and/or “Pricing” for the SBP.

Pricing Information

14. **PRICING:** Insert prices charged for each program in which this site will participate (e.g. if the full price for lunch is \$2.00, insert 2.00 under NSLP and in the column next to Paid).

NON-PRICING: Select if students will not be charged for meals.

REDUCED CHARGE WAIVED: Only paid students and adults are charged for meals.

NOTE: The maximum charge for reduced-price meals is \$0.40 for lunch, \$0.30 for breakfast, and \$0.15 cents for snacks. Do not enter dollar signs in the meal pricing fields.

Meal Type	Pricing Information	Paid Price	Reduced Price	Adult Price
National School Lunch Program (NSLP)	Pricing	4.25	0.40	6.00
School Breakfast Program (SBP)	Pricing	2.50	0.30	4.00
Afterschool Snack Program (ASP)				

- **Sites that are non-pricing programs** must select “Non-Pricing – Universal Free” for the NSLP and/or “Non-Pricing – Universal Free” for the SBP. RCCIs may choose this option.

Pricing Information

To copy pricing information from another Site, select the Site from the drop-down list and click the Copy button.

14. **PRICING:** Insert prices charged for each program in which this site will participate (e.g. if the full price for lunch is \$2.00, insert 2.00 under NSLP and in the column next to Paid).

NON-PRICING: Select if students will not be charged for meals.

REDUCED CHARGE WAIVED: Only paid students and adults are charged for meals.

NOTE: The maximum charge for reduced-price meals is \$0.40 for lunch, \$0.30 for breakfast, and \$0.15 cents for snacks. Do not enter dollar signs in the meal pricing fields.

Meal Type	Pricing Information	Paid Price	Reduced Price	Adult Price
National School Lunch Program (NSLP)	Non-Pricing - Universal Free			6.00
School Breakfast Program (SBP)	Non-Pricing - Universal Free			4.00
Afterschool Snack Program (ASP)				

- **Sites that are opting for the Readiness in School Everyday (RISE) funds and have waived the reduced price for NSLP and are offering all meals at no cost for SBP must select “Pricing – Reduced Charge Waived” for the NSLP and “Non-Pricing – Universal Free” for the SBP.**

Pricing Information

14. **PRICING:** Insert prices charged for each program in which this site will participate (e.g. if the full price for lunch is \$2.00, insert 2.00 under NSLP and in the column next to Paid).

NON-PRICING: Select if students will not be charged for meals.

REDUCED CHARGE WAIVED: Only paid students and adults are charged for meals.

NOTE: The maximum charge for reduced-price meals is \$0.40 for lunch, \$0.30 for breakfast, and \$0.15 cents for snacks. Do not enter dollar signs in the meal pricing fields.

Meal Type	Pricing Information	Paid Price	Reduced Price	Adult Price
National School Lunch Program (NSLP)	Pricing - Reduced Charge Waived	4.00	0.00	6.00
School Breakfast Program (SBP)	Non-Pricing - Universal Free			5.00
Afterschool Snack Program (ASP)				

7. Complete **Section A** – National School Lunch Program, **Section B** – School Breakfast Program (if applicable), **Section C** – Afterschool Snack Program (if applicable), and **Section D** – Special Milk Program (if applicable). Review program information and update as necessary.

Note: For **A5 How Many Points of Service**, include the number of classrooms that serve and count meals outside of the cafeteria.

Section A - National School Lunch Program (NSLP)

A1. A. Months of Operation: (Check all that apply)

All: ☐ Jul: ☐ Aug: ☒ Sep: ☒ Oct: ☒ Nov: ☒ Dec: ☒
 Jan: ☒ Feb: ☒ Mar: ☒ Apr: ☒ May: ☒ Jun: ☒

B. Days of the week meals are served and claimed for reimbursement: (Check all that apply)

Mon-Fri: ☐ Mon: ☒ Tue: ☒ Wed: ☒ Thu: ☒ Fri: ☒ Sat: ☐ Sun: ☐

A2. Meal Service Times Begin Time: 10 AM :20 End Time: 12 Noon :45

A3. Will Offer versus Serve (OVS) be implemented for Lunch? ☒ Yes ☐ No

A4. What grades are utilizing Offer vs. Serve (OVS) for Lunch?

All: ☐ Early Education: ☐ 1st grade: ☒ 5th grade: ☒ 9th grade: ☐
 Head Start: ☐ 2nd grade: ☒ 6th grade: ☐ 10th grade: ☐
 Pre-Kindergarten: ☒ 3rd grade: ☒ 7th grade: ☐ 11th grade: ☐
 Kindergarten: ☒ 4th grade: ☒ 8th grade: ☐ 12th grade: ☐

A5. How many Points of Service?

2 | Updating Site Agreements

- For **Certification**, click the **check box** and then click **Save**.

Certification

 ☐ I hereby certify that neither the Sponsor nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

I certify under penalty of perjury that the information on these application forms is true and correct, and that I will immediately report to the State any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of federal funds. The State may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable federal and state criminal statutes.

On behalf of the Sponsor, I hereby agree to comply with all state and federal laws and regulations governing the Child Nutrition Programs administered by the State. In accordance with Federal law and U.S. Department of Agriculture policy, this Sponsor does not discriminate on the basis of race, color, national origin, sex, age or disability. I will ensure that all monthly claims for reimbursement are true and correct and that records are available to support these claims.

 **Save** Cancel

- Click on **Finish**. The site application is now complete. The CNP System directs back to the **Site List**. Repeat steps 2-8 for each site.

The Site Application has been saved.

 < Edit **Finish**

Action	Site ID / Site Name	NSLP	SBP	ASCP	SMP	FFVP	Version / Status
	Totals	5	5	0	0	0	
View Modify	01 School	X	X				Original / Not Submitted
 View Modify	03 School	X	X				Original / Pending Validation
View Modify	51 School	X	X				Original / Pending Validation

3 — Checklist Summary

After the sponsor and site applications have been saved, the CNP System will generate a checklist of items that need to be submitted with the application.

- 1. Click on **Details**.



Packet Assigned To: unassigned				
Action	Attention	Form Name	Latest Version	Status
View Modify Admin		Sponsor Application	Original	Not Submitted
Details		Meal Pattern Compliance Dashboard		Pending Validation
Details		Checklist Summary (12)		
Details		Application Packet Notes		

- 2. Click on **Sponsor Information**.

SNP Checklist Summary			
Type of Agency: Educational Institution Type of SNP Organization: Public			
Sponsor	Total Items	Submitted Items	Approved Items
 School District	12	0	0

3 | Checklist Summary

3. The SNP Checklist will list the items that need to be attached to the application. Click on the **blue paper clip** to attach the requested items. In the comment section, write the name of the document being attached. After the items are attached, click the check box under the heading **Document Submitted to CNP** (the **Date** will generate). Click **Save**.

Required Forms/Documents to send to CNP	 Document Submitted to CNP	Date Submitted to CNP	Document on File w/ CNP	Status	Status Date
Policy Statement (SIGNED)	 ☒	/27/2026	☐	Pending Approval	05/27/2026
Meal Application and Data Management Process	 ☒	05/27/2026	☐	Pending Approval	05/27/2026
Site Information on Money Collection System and Point - of Service Meal Counting System	 ☒	05/27/2026	☐	Pending Approval	05/27/2026
Public Media Release	 ☒	05/27/2026	☐	Pending Approval	05/27/2026
Application for Free and Reduced-price School Meals or Free Milk	 ☐		☐	Pending Approval	05/27/2026
Parent/Guardian Letter: Frequently Asked Questions (FAQs) (Meals or Milk)	 ☐		☐	Pending Approval	05/27/2026
Parent/Guardian Notification Letter (approving or denying meals or milk benefits)	 ☐		☐	Pending Approval	05/27/2026
Parent/Guardian Notification Letter of Direct Certification - Version 1	 ☐		☐	Pending Approval	05/27/2026
Parent/Guardian Notification Letter of Direct Certification - Version 2	 ☐		☐	Pending Approval	05/27/2026
Notice of Selection for Verification of Eligibility	 ☐		☐	Pending Approval	05/27/2026
Letter of Verification Results and Adverse Action for Income Households	 ☐		☐	Pending Approval	05/27/2026
SNP Upload	 ☐		☐	Pending Approval	05/27/2026

Action	Checklist Item	Comment	Attachment D:
There are no attachments			



4. If a required checklist item is not listed under the heading **Required Forms/Documents to send to CNP**, use **SNP Upload** and repeat step 4.

Letter of Verification Results and Adverse Action for Income Households		☐		☐	Pending Approval
 SNP Upload		☐		☐	Pending Approval

Checklist Items

All sample forms listed below are available on the CSDE's [Forms for School Nutrition Programs](#) webpage. For additional guidance, refer to the CSDE's [Required Items for the Online Sponsor Application "Checklist Summary."](#)

Specific forms for the Community Eligibility Provision (CEP) are available in the "[Documents/Forms](#)" section of the CSDE's CEP webpage. Specific forms for the Special Milk Program (SMP) are available in the "[Forms](#)" section of the CSDE's SMP webpage.

1. **Policy Statement:** The Policy Statement outlines the school food authority's () responsibilities specific to the agreement to participate in the National School Lunch Program (NSLP) and/or the School Breakfast Program (SBP), and the Afterschool Snack Program, or to provide free milk under the Special Milk Program (SMP). The SFA assures the CSDE that the policy with respect to determining the eligibility of children for free and reduced-price school meals will be uniformly implemented in all NSLPs and SBPs under its jurisdiction, as well as free milk in the SMP. Attach the school food authority's (SFA) completed and signed [policy statement](#).
2. **Meal Application and Data Management Process:** Attach the SFA's completed [Meal Application and Data Management Process](#) form.
3. **Money Collection and Point-of-Service (POS) Meal Count Systems:** Attach the SFA's completed form, [Site Information on Money Collection and Point-of-service Meal Count Systems for the School Nutrition Programs](#).
4. **Public Media Release:** Attach the SFA's public media release for school year 2025-26.
 - **Non CEP schools:** [Sample Public Media Release for Public School Sponsors of the Connecticut School Nutrition Programs](#)
 - **CEP schools only:** [Sample Press Release for the Community Eligibility Provision \(CEP\)](#)
5. **Application for Free and Reduced-price School Meals or Free Milk:** If applicable, attach the SFA's [Application for Free and Reduced-price School Meals or Free Milk](#) distributed to households.

6. **Parent/Guardian Letter: Frequently Asked Questions (FAQs) About Free and Reduced-price School Meals, and/or Parent/Guardian Letter: Frequently Asked Questions (FAQs) About Free School Milk:** Attach the SFA's [parent letters](#) distributed to households.
7. **Parent/Guardian Notification Letter (Approval/Denial of Free and Reduced Meals or Free Milk):** If applicable, attach the SFA's [parent/guardian notification letter](#) for approving or denying meals or milk benefits).
8. **Parent/Guardian Notification Letter for Direct Certification based on SNAP, TFA or Medicaid Benefits (Version 1):** Attach the SFA's parent/guardian notification letter for [Direct Certification Version 1](#).
9. **Parent/Guardian Notification letter for Direct Certification based on Foster Child, Homeless, Runaway or Head Start (Version 2):** Attach the SFA's parent/guardian notification letter for [Direct Certification Version 2](#).
10. **Parent/Guardian Notification letter for Direct Certification based on Medicaid Benefits – Reduced-Price Meals (Version 3):** Attach the SFA's parent/guardian notification letter for [Direct Certification Version 3](#).
11. **Household Letter to Verify Eligibility:** If applicable, attach the SFA's [Household Letter to Verify Eligibility](#).
12. **Letter of Verification Results and Adverse Action for Income Households:** If applicable, attach the SFA's notice of selection for verification of eligibility, [Letter of Verification Results and Adverse Action for Income Households](#).
13. **Interschool Agreement:** If applicable, attach all Interschool Agreement Forms. For more information, refer to the "[Interschool Agreements](#)" section of the CSDE's [Forms for School Nutrition Programs](#) webpage.
14. **Vended Meals Contract:** If applicable, attach all [vended meals contracts](#).

4 — Submitting the Application Packet for Approval

1. When the sponsor has completed and saved the Sponsor Application and all Site Applications without errors and attached all required Checklist Items, the Application Packet can be submitted for approval. Click on **Submit for Approval**.

Action	Attention	Form Name	Latest Version	Status
View Modify		Sponsor Application	Original	Not Submitted
Details		Meal Pattern Compliance Dashboard		Pending Validation
Details	➔	Checklist Summary (12)		
Details		Application Packet Notes		

Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	1	0	0	0	0	1
Seamless Summer Option	0	0	0	0	0	0	0


< Back
Submit for Approval

4 | Submitting the Application Packet for Approval

- The Application Packet has now been submitted and is ready for approval by the CSDE. The application can no longer be modified and will be in **View Only** mode.

The Application Packet is currently under review by the State and is unavailable for changes.

					Packet Assigned To: unassigned		
Action	Attention	Form Name	Latest Version	Status			
View Modify	➡	Sponsor Application	Original	Submitted			
Details		Meal Pattern Compliance Dashboard		Pending Validation			
Details	➡	Checklist Summary (12)					
Details		Application Packet Notes					
Site Applications	Approved	Pending	Return for Correction	Denied	Withdrawn/ Closed	Error	Total Applications
School Nutrition Program	0	1	0	0	0	0	1
Seamless Summer Option	0	0	0	0	0	0	0

5 — Food Service Management Company

1. If the school nutrition program is managed by a food service management company (FSMC) (question 52) click **Yes** and complete the **Sponsor Contact for FSMC Contract** information as part of the **Sponsor Agreement**.

This section must be updated with the food service director's direct company manager. This would be an area manager or district manager. For information on the steps for the sponsor agreement, refer to [section 1](#).

Food Service Management Company (FSMC)

52. Will the school nutrition program be managed by a Food Service Management Company (FSMC)? ☒ Yes ☐ No

Sponsor Contact for FSMC Contract

53. Name: Salutation First Name Last Name

54. Email Address: 

55. Phone: Ext: Fax:

56. Title:

2. After the **Sponsor Application** has been saved, the **FSMC Contract List** will open.
Note: With the addition of the FSMC module, this section will populate from the information entered and approval given in the FSMC Module. No additional information is required and no updates are needed for this section of the Sponsor Application.

Action	Attention	Form Name	Latest Version	Status
View Modify		Sponsor Application	Original	Pending Validation
Details		 FSMC Contract List		1 Contract

3. The **Checklist Summary** must still be completed. Click on **Details**.

Packet Assigned To: unassigned

Action	Attention	Form Name	Latest Version	Status
View Modify Admin		Sponsor Application	Original	Not Submitted
Details	✓	FSMC Contract List		1 Contract
Details		Meal Pattern Compliance Dashboard		Pending Validation
Details	➔	Checklist Summary (13)		
Details		Application Packet Notes		

4. Click on **Sponsor** name.

Sponsor	Total Items	Submitted Items	Approved Items
School District	13	0	0

5. Click on the **check box** next to the **Food Service Management Company Contract**.
Note: Do not upload any documents. Required documents are included as part of the FSMC module or have been submitted to the CSDE via email.

SNP Upload		☐		☐	Pending Approval
FSMC Contract Renewal Amendment		☒		☐	Pending Approval

6. Click on **Save** and **Finish**.

FSMC Contract Renewal Amendment		☒		☐	Pending Approval
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Action	Checklist Item	Comment
		There are no attachments

➔ Save Cancel

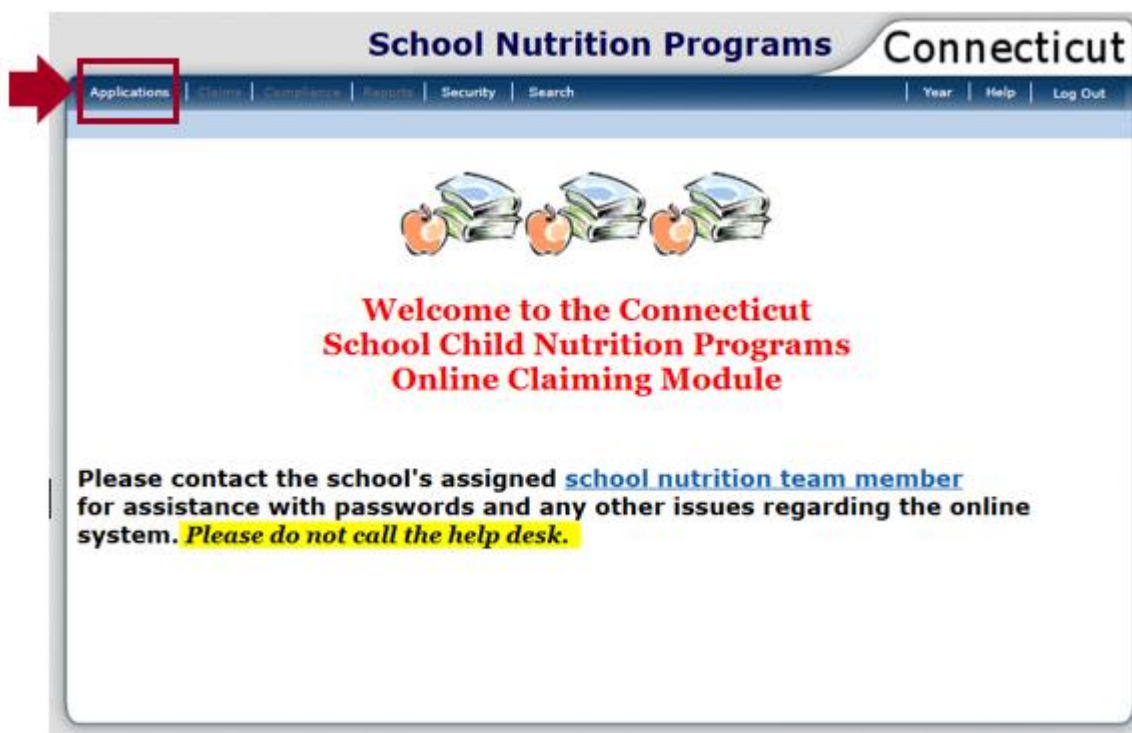
The Checklist has been saved.

➔ Finish

6 — Food Safety Inspection Report

Enter the number of food safety inspections at each site for school year 2025-26.

1. **Log in** to the CNP System at <https://ct.cnpus.com/prod/Splash.aspx>.
2. Click on **Applications**.



3. Click on **Food Safety Inspections**.



4. Click on **Modify for School Year 2025-26**.



Action	School Year	Received Date	Status
Modify	2025 - 2026		Not Started

For each site, enter in the number of **Food Safety Inspections** for school year 2025-26. If the sponsor selects **None** or **One**, also indicate **why** from the drop-down box. If the reason **why** is not listed, the sponsor may select **Other** and will be able to enter the reason in the **Reason** box.

Instructions

Food Safety Inspections for School Year (SY) 2025 - 2026

Indicate the number of Food Safety Inspections conducted at each listed site between July 1, 2025 and June 30, 2026. If you did not select "Two" or "Three or more" in item 1a, you MUST also indicate WHY you did not meet the regulation by selecting one of the options in item 1b. If you select "Other", enter the reason in the space provided.

Site ID	Site Name and Address	1. Safety Inspections performed in 2025 - 2026. For each site indicating either "Zero" or "One", select the reason in 1b.	
		1a. Food Safety Inspections	1b. Reason for fewer than two inspections conducted (Select the most predominant reason).
01	School	 ▼	▼ Reason: 

5. After all the information has been entered, click on **Save**.

Instructions

Food Safety Inspections for School Year (SY) 2025 - 2026

Indicate the number of Food Safety Inspections conducted at each listed site between July 1, 2025 and June 30, 2026. If you did not select "Two" or "Three or more" in item 1a, you MUST also indicate WHY you did not meet the regulation by selecting one of the options in item 1b. If you select "Other", enter the reason in the space provided.

Site ID	Site Name and Address	1. Safety Inspections performed in 2025 - 2026. For each site indicating either "Zero" or "One", select the reason in 1b.	
		1a. Food Safety Inspections	1b. Reason for fewer than two inspections conducted (Select the most predominant reason).
01	School	Two	Reason:



6. Click on **Finish**.

The Food Safety Inspection has been processed.

