#### **Administrative Review Organizational Tool (AROT)**

**District:** XXX

**Review Month: XXX** 

Sponsors must use this organizational tool to provide the REQUIRED documentation for completion of the Administrative Review (AR) of the U.S. Department of Agriculture's (USDA) Child Nutrition Programs operated by the sponsor.

**How does this tool work?** Each section of the AROT has a cover page that includes a list of the required documents. Please note the information below.

- COPY: The state agency (SA) will take a copy of some of the documents.
- **REVIEW ATTACHMENT:** The SA will review these documents off site.
- **REVIEW**: The SA will review these documents *on site*.

Place all documents listed under **COPY** and **REVIEW** with the corresponding cover page in a folder, clipped together, or otherwise organized. **Have all documents available for the Review Team on the first scheduled day of the review**.

**If a document is listed, it is required**. If you do not know what the document is, please check with the Lead Reviewer to clarify **prior to** the start of the on-site portion of the AR.

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#### **District Information**

#### Make a COPY for the SA

| _ | Names and titles of stan at the selected schools.   |
|---|---|
|   | For the selected schools: Mealtimes for the days of the on-site portion of the review. <i>Include</i> |
|   | National School Lunch Program (NSLP), School Breakfast Program (SBP), Fresh Fruit and Vegetable       |
|   | Program (FFVP), and Afterschool Snack Program (ASP).  |
|   |   |

- o If the schools being visited for the SBP serve breakfast in the classroom, specify the number of locations where meals are counted.
- □ Names and phone numbers for key staff (i.e., food service director, business official, determining officials, claims preparer).

#### **Upload as a REVIEW ATTACHMENT**

Names and titles of staff at the selected schools

- ☐ The district charge policy and procedure for collecting outstanding balances at the end of the school year.
  - Operational Memorandum No. 11-22 Connecticut Statutory Requirements for Unpaid Meal Charges in Public Schools
  - Connecticut State Department of Education (CSDE) Operational Memorandum No. 4-17:
     Guidance on Unpaid Meals and Collection of Delinquent Meal Payments
  - o USDA Memo SP 23-2017: Unpaid Meal Charges: Guidance and Q&As
  - o <u>USDA Memo SP 29-2017: 2017 Edition: Overcoming the Unpaid Meal Challenge: Proven</u> Strategies from Our Nation's Schools
- ☐ District procedure for provision of field trip meals. The procedure should include the following:
  - Food safety measures, i.e., Hazard Analysis and Critical Control Point (HACCP) Standard Operating Procedures (SOPs)
  - Compliance with USDA meal pattern requirements
  - Method used to properly count meals at the point of service (POS)
- □ 2022-23 waivers or preapprovals, as applicable (Note that these are not COVID related waivers):
  - Lunch time waiver
  - Residential child care institution (RCCI) exception for safety if serving multiple age/grade groups
  - Weekend or vacation meals
  - Separation by gender (CSDE Operational Memorandum No. 30-15)
  - Preschool family-style meal service preapproval
  - Other waivers or preapprovals not listed

# Section II: Meal Access and Reimbursement Certification and Benefit Issuance

#### Make a COPY for the SA

| Up | pload as a REVIEW ATTACHMENT  |
|----|---|
|    | District/School Benefit Issuance Document (e.g., Master List). Provide the document that is maintained and updated by the determining official. This is for the first day of the review month   |
| П  | The <i>point-of-service</i> benefit issuance document (Master List) from where the students actually  |
|    | receive their eligibility benefit.  |
|    | ave available for the SA to REVIEW (may be asked to upload as a review tachment)  |
|    | Printed statistical sample of student names provided by the CSDE  |
|    | Student applications and/or documentation of eligibility (e.g., the Direct Certification List). The applications and documents should be in the same order as the names listed in the sorted Statistical Sample that the Lead Reviewer returns to the Determining Official. |
|    | All denied applications   |

# Section II: Meal Access and Reimbursement Verification

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

Not applicable.

**Have available for the SA to REVIEW** (may be asked to upload as a review attachment)

- □ A document to show the total number of newly approved applications on file as of **October 1**, **2022.** This is the list used for the selection of applications for verification.
- ☐ All verified applications for the current school year
- ☐ The actual verification materials used by the sponsor in conducting verification including:
  - the completed Verification Selection Worksheet for each household selected for verification (completed online);
  - the original household application for all verified households;
  - o the verification notification letter to selected households;
  - documentation of follow-up with unresponsive households; and
  - o any notice of adverse action.
- □ Documentation from the point of service demonstrating change in student eligibility status as a result of verification, when applicable. This could be a printout of the Benefit Issuance Document on date change was made or **screen shot** of the change made in the electronic POS system.

# Section II: Meal Access and Reimbursement Meal Counting and Claiming

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

☐ <u>Edit Check Worksheets</u> for all programs (including the ASP) and all schools in the district in support of the claim for reimbursement for the <u>review month</u>. *Edit Checks must have the attendance factor applied and include paid students*.

# Have available for the SA to REVIEW (may be asked to upload as a review attachment)

- All supporting documentation from the point of service for the claim submitted for the review month for all Child Nutrition Programs at all schools, including the point-of-service daily meal count sheets for the Special Milk Program (SMP). These are the specific documents the claims preparer uses in the placement of the monthly claim for reimbursement.
- ☐ **Individual site claims** submitted for all schools for the review month.

# Section III: Nutritional Quality and Meal Pattern Meal Components and Quantities

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|    | Detailed menus for all child nutrition programs for the first week of the review month for the following selected schools: name of schools. This menu must include all choices available to students. Include all milk varieties and vegetable subgroups.   |
|----|---|
|    | Menus for the review month for all selected schools.  |
|    | Menus for the week of the on-site visit for all selected schools.   |
| U  | pload as a REVIEW ATTACHMENT  |
|    | Completed Menu Worksheet portion of a USDA-approved Menu Planning Tool for Certification (Menu Worksheet) for the first week of the review month, for the selected breakfast school and all schools for lunch, for each grade group (e.g. K-5, 6-8, K-8, 9-12) in that school. <i>Include main menu items and ALL alternate menu choices.</i> Do not print the menu worksheets.  OR |
|    | Another USDA-approved menu software may be used to demonstrate meal pattern compliance, however the reviewer must be able to see all layers to determine how crediting was entered or a school nutrition staff member must be made available during the onsite portion of the review to demonstrate process used.   |
|    | ave available for the SA to REVIEW (may be asked to upload as a   |
| re | view attachment)  |
|    | <b>Completed</b> Medical Statement for Meal Modification in School Nutrition Programs (for students at the selected schools)  |
|    | Crediting information for the menu items served during the week of the onsite review.   |
|    | Production records for breakfast at the selected schools, and lunch from each selected school for the first week of the review month. Production records must be complete, listing all items offered to students, including milk varieties and condiments.  |
|    | Recipes for foods served at breakfast <b>at the selected schools</b> , and lunch from <b>each selected school</b> for the first week of the review month.   |
|    | Food labels (Child Nutrition (CN) labels, product formulation statements to show crediting information, labels with whole grain-rich (WGR) information) for foods served on the breakfast at the selected schools, and lunch menu for the first week of the review month for each selected school.  |

**Note:** The **Menu Documentation Organizational Tool (MDOT)** is provided by the lead reviewer to organize all documents in support of this area. Have these documents available in the order specified by the MDOT for the onsite portion of the review.

# Section V: General Areas Civil Rights

#### Make a COPY for the SA

Not applicable.

## **Upload as a REVIEW ATTACHMENT**

| Documentation of most recent civil rights training used pertaining to the USDA Child Nutrition  |
|---|
| Programs for all staff (food service workers, hearing official, determining officials, verifying  |
| officials, teachers involved with in classroom meals, etc.), including the agenda and sign-in sheets  |
| The CSDE's civil rights training is available in the "School Nutrition Programs" section of the   |
| CSDE's <u>Civil Rights for Child Nutrition Programs</u> webpage.  |
| The district's written procedures for handling Child Nutrition Civil Rights complaints. <i>The district must have a written, formal procedure for receiving and processing complaints alleging discrimination within the Child Nutrition programs. All Civil Rights Complaints pertaining to the USDA Child Nutrition Programs must be reported to USDA Office of Civil Rights or the CSDE at the</i> |
| time they occur. For an example of a complaint procedure form, refer to the CSDE's document,  |
| Sample Civil Rights Complaint Procedures for School Nutrition Programs  |

#### Have available for the SA to REVIEW

# **Section V: General Areas On-site Monitoring**

#### Make a COPY for the SA

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|----|------|------|---------------|-------------|--------|
|----|------|------|---------------|-------------|--------|

| The completed School Food Authority On-site Review Checklists for all schools under the school  |
|---|
| food authority (SFA). On-site monitoring must occur in all schools, including interschool   |
| agreements and alternative high schools, for the NSLP and for 50 percent of all SBP schools, prior to the first day of the scheduled on-site Administrative Review. |
| Documentation of follow-up and corrective action taken for any deficiencies noted.  |

# Section V: General Areas Local School Wellness Policy

#### Make a COPY for the SA

Not applicable.

Due dates to upload:

• November 30, 2022

#### **Upload as a REVIEW ATTACHMENT**

- ☐ A copy of the **current** local school wellness policy.
- ☐ A copy of the district's most recent assessment on the implementation of the local school wellness policy. Completed Triennial Assessment Steps 1-4.
- ☐ Summary of activities since Triennial Assessment was completed.

#### Have available for the SA to REVIEW

# Section V: General Areas Smart Snacks in School

#### Make a COPY for the SA

Not applicable.

### **Upload as a REVIEW ATTACHMENT**

#### If not Connecticut Healthy Food Certified

| Documentation for the first week of the review month of all foods and beverages sold a la carte at the selected schools. Acceptable documentation may be menus, production records, and related materials.  |
|---|
| Nutrition documentation for food items sold by the food service department to students in <b>all</b> schools in the district.   |
| Nutrition documentation for food items sold by entities outside of the school food service, such as school stores, PTAs, and fundraisers. Any documentation that contains the necessary information is acceptable including the Alliance for a Healthier Generation's <u>Smart Snacks</u> <u>Calculator</u> printouts, recipes, product specifications, highlighted items on the CSDE's <u>List of Acceptable Foods and Beverages</u> , or other documentation. |

#### **If Connecticut Healthy Food Certified**

To be determined.

#### Have available for the SA to REVIEW

# Section V: General Areas Food Safety/Storage/Buy American

#### Make a COPY for the SA

| U | pload | as a | REVIEV | N ATT | ACHMENT |
|---|-------|------|--------|-------|---------|
|---|-------|------|--------|-------|---------|

|    | Written food safety plan based on the Process Approach to HACCP Principles and Standard Operating Procedures (SOPs). <i>Include SOPs for in classroom feeding, field trips, and other alternate points of service.</i>   |  |  |  |  |
|----|--|--|--|--|--|
|    | Documentation of annual review of the food safety plan.  |  |  |  |  |
|    | If non-domestic products are used, provide documentation of justifications to support exception to the Buy American requirements.  • <u>USDA Memo SP 38-2017</u> : Compliance with and the Enforcement of the Buy American Provision in the National School Lunch Program  • <u>Sample Buy American Justification Form</u>   |  |  |  |  |
|    | Copies of two most recent food safety inspections for each selected school being reviewed. If one or no inspections were completed in the current school year, provide copies of the inspections at the selected schools conducted during the current and previous (2021-22) school year. In the absence of two inspections, provide documentation of the request made to the local health department for two inspections. |  |  |  |  |
|    | The addresses of any off-site storage facilities.  |  |  |  |  |
| Ha | ave available for the SA to REVIEW   |  |  |  |  |
| No | t applicable.  |  |  |  |  |

# Section V: General Areas School Breakfast Program (SBP) and Summer Food Service Program (SFSP) Outreach

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

| Documentation of household notification of availability of the SBP prior to or at beginning of school year.  |
|--|
| Documentation of reminders provided throughout school year of availability of SBP.   |
| Documentation of household notification of availability of and location of free summer meals via the SFSP. <b>Note:</b> This is required even if your district does not offer summer meals. For more information, visit the CSDE's <u>Summer Food Service Program</u> webpage. |
| If outreach in these areas has not been completed, upload the plan of action for how this  |

#### Have available for the SA to REVIEW

# Section V: General Areas Professional Standards

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

☐ The spreadsheet currently being used to track the training of all school nutrition staff members according to USDA Professional Standards.

- The spreadsheet must contain a complete list of the nutrition program employees and include the information below. (Note: The list must be current as of the start of the on-site review).
  - Name
  - Date hired
  - Title/position
  - Employee status (full time, part time, acting, substitute, include average hours per week for each employee)
  - USDA Professional Standards Employee Category/Position (Nutrition Program Director, Manager, or Staff)
  - Professional development hours completed
- ☐ For School Nutrition Program Directors hired on or after July 1, 2015:
  - Highest level of education achieved,
  - Education achievement certificates (i.e., diplomas),
  - Document demonstrating years of school nutrition program experience,
  - Prior food safety training record,

# Have available for the SA to REVIEW (may be asked to upload as a review attachment)

Documentation to support the spreadsheet uploaded

- Previous (school year 2021-22) and current (school year 2022-23) training sign-in sheets, attendance rosters, and agenda.
- Certificates of completion for any off-site trainings being tracked.
- o Planned/scheduled trainings for the remainder of school year 2022-23.

## **Afterschool Snack Program**

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

The following items for the selected schools:

☐ Documentation indicating that the approved after school care program offers educational or enrichment activities.

|  | Documentation | indicating | the time | of snack | service. |
|--|---------------|------------|----------|----------|----------|
|--|---------------|------------|----------|----------|----------|

|   | Snack | manıı | for | the | review | month  |
|---|-------|-------|-----|-----|--------|--------|
| _ | SHACK | menu  | 101 | uie | leview | HIOHUI |

□ Production records for snacks served during the first week of the review month. Production records are mandatory. ASP production records are available in the "Production Records for the ASP" section of the CSDE's ASP webpage.

|  | Description of the pro | cedure used to ens | ure accurate coun | ting and | claiming of s | nacks. |
|--|------------------------|--------------------|-------------------|----------|---------------|--------|
|--|------------------------|--------------------|-------------------|----------|---------------|--------|

| Complete | d ASP | on-site | monitoring | forms | for the two | required | visits at | the sel | ected s | site. |
|----------|-------|---------|------------|-------|-------------|----------|-----------|---------|---------|-------|
|          |       |         |            |       |             |          |           |         |         |       |

The following items for the selected schools:

☐ All documentation available in support of the claim for the review month.

☐ For programs that are **not** area eligible, the roster of students receiving snacks for the first week of the review month.

#### Have available for the SA to REVIEW

# **Special Milk Program**

#### Make a COPY for the SA

Not applicable.

# **Upload as a REVIEW ATTACHMENT**

| Claim for reimbursement for the review month.  |
|--|
| All supporting documentation for the selected claim.   |
| Copies of invoices reflecting milk pricing and delivery amounts from the first week of the review month. |
| Copy of the roster used for point-of-service milk counts for the first week of the review month.         |

#### Have available for the SA to REVIEW

# Fresh Fruit and Vegetable Program (FFVP)

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

- ☐ FFVP claim submitted for the selected month.
- ☐ All supporting documentation for the above claim.
  - o Invoices (anything claimed on your monthly report)
    - Fresh fruits/vegetables
    - Dips, paper, small equipment
    - Large equipment purchases (must have been approved prior to purchase)
  - Payroll records
    - Frontline staff
    - Administrative staff

#### Have available for the SA to REVIEW

# **Preschool Meals in the School Nutrition Programs**

#### Make a COPY for the SA

Not applicable.

#### **Upload as a REVIEW ATTACHMENT**

☐ If the preschool children are eating separately from other children in grades K-8, a separate preschool menu must be uploaded. For guidance, refer to the CSDE's <u>Meal Patterns for Preschoolers in School Nutrition Programs</u> webpage.

#### Have available for the SA to REVIEW

To be determined.

# **School Nutrition Special Events (Optional)**

This section is an opportunity for you to promote and inform the SA about the great things that you are doing in your school nutrition programs.

| National School Breakfast Week activities   |  |  |  |
|---|--|--|--|
|   |  |  |  |
| National School Lunch Week activities   |  |  |  |
|   |  |  |  |
| Farm to School activities Handout: Connecticut Farm to School Resources   |  |  |  |
| theck off each farm to school area that the district engages in with students.  |  |  |  |
| <ul> <li>□ Schools/cafeterias</li> <li>□ Curriculum</li> <li>□ Gardens</li> <li>□ Marketing</li> <li>□ Purchasing</li> </ul>                                      |  |  |  |
| <b>Special Events</b> Describe below or list any special activities or events involving the School Nutrition Programs (i.e., pecial promotions, lucky tray days): |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |

Attach relevant documents (i.e., photos, fliers, etc.) as desired.

# **AROT Document Upload Checklist**

The following items may be uploaded as applicable, to the CSDE's <u>Connecticut Online Application and Claiming System for Child Nutrition Programs</u> (CNP System) used for the Administrative Review, as noted in the AROT. As documents are uploaded, title them as noted in this chart to clearly identify each document for the CSDE reviewers. *Use the first column to keep track of the uploaded documents.* This list is not all inclusive.

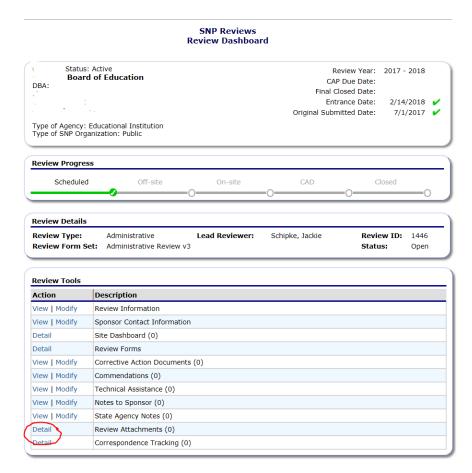
| Date<br>Uploaded | Attachment  | TITLE<br>in description<br>section  | Special Notes   |
|------------------|---|---|---|
|                  | District Charge Policy and Debt Collection                                      | Charge Policy   |   |
|                  | District Benefit Issuance Document  | BI Document   | This must include ALL students in the SFA for the first date of the selected Review Month.  |
|                  | Edit Check<br>Worksheets  | Edit Check  | If different edit check worksheets are uploaded for various programs/sites, <b>TITLE</b> as follows: Edit Check-NSLP-Smith; Edit Check-SBP-St Johns, Edit Check-NSLP-All sites. |
|                  | USDA Menu Planning<br>Tool  | Menu Worksheet<br>NSLP (School<br>Name); Menu<br>Worksheet SBP<br>(School Name) | If uploading for more than one school or program, <b>TITLE</b> as follows: Menu Worksheet-SmithES-NSLP; Menu Worksheet-JonesES-SBP; Menu Worksheet-Smith&JonesES-NSLP           |
|                  | Civil Rights Training   | CR Training   |   |
|                  | Civil Rights Complaint<br>Procedure   | CR Complaint<br>Procedure   |   |
|                  | Local School Wellness<br>Policy   | LSWP  |   |
|                  | Local School Wellness<br>Policy Assessment-<br>Triennial Assessment<br>Step 1-4 | LSWP Assessment   |   |
|                  | Food Safety Plan  | HACCP Plan  |   |
|                  | Food Safety Plan<br>Annual Review   | HACCP Review  |   |

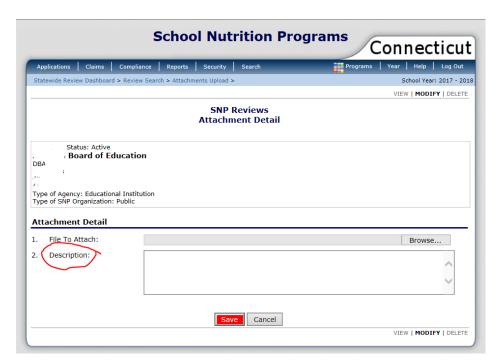
2023

| Date<br>Uploaded | Attachment  | TITLE<br>in description<br>section                  | Special Notes   |
|------------------|---|---|---|
|                  | Buy American<br>Exception                               | Buy American Exception (name product)               | Upload justification for each nondomestic food item purchased.  |
|                  | School Breakfast<br>Program Outreach<br>Start of Year   | SBP Outreach Start                                  |   |
|                  | School Breakfast<br>Program reminders                   | SBP Reminders                                       |   |
|                  | Summer Meals<br>Outreach                                | Summer Outreach                                     |   |
|                  | Professional Standards Spreadsheet 2021-22              | Prof Stnds 21-22                                    |   |
|                  | Professional<br>Standards<br>Spreadsheet 2022-23        | Prof Stnds 22-23                                    |   |
|                  | Afterschool Snack<br>Program Review<br>Month Menu       | ASP Menu (school name)*                             | * If the review of the ASP is occurring at more than one school, identify the upload documents with each school name, as appropriate. |
|                  | Afterschool Snack Program Production Records            | ASP Prod Record (school name)*                      | These records must be completed for the selected Review Week.   |
|                  | Afterschool Snack<br>Counting and Claiming<br>Procedure | ASP count-claim                                     |   |
|                  | Afterschool Snack<br>Monitoring                         | ASP first (school name)*; ASP second (school name)* |   |
|                  | Fresh Fruit and<br>Vegetable Program                    | FFVP Claim  |   |
|                  | Fresh Fruit and Vegetable Program Claim Documentation   | FFVP Support Doc                                    |   |
|                  | Preschool Menu  | Preschool Menu                                      |   |

next page for screen shots demonstrating how to upload attachments in the CNP System.

# **Screen Shots from Compliance Module of CNP System**







For more information, visit the Connecticut State Department of Education's (CSDE) Administrative Review webpage or contact the school nutrition programs staff in the CSDE Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841.

This document is available at https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/AdminRev/AROT.pdf.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

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/documents/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:

- 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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