

Verification Checklist

School Year 2026-27

Local educational agency (LEA): _____

Date: _____

Type of verification conducted:

☐ Standard Sample Size

☐ Alternate One

1. Did the district/institution follow the instructions in the U.S. Department of Agriculture's (USDA) [Eligibility Manual for School Meals](#) and the appropriate Connecticut State Department of Education (CSDE) [operational memoranda](#) to ensure that the verification sample was chosen correctly?

☐ Yes

☐ No

If "No" explain:

2. Did anyone from the district/institution attend online training on verification conducted by the CSDE during the past year?

☐ Yes

☐ No

If "No" explain:

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3. Was more than the required sample size verified?

☐ Yes

☐ No

If "Yes" explain:

4. Were the state agency (CSDE) sample verification forms used?

☐ Yes

☐ No

If "No" explain:

5. Was the verification process completed by November 15?

☐ Yes

☐ No

If "No" explain:

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6. Was a confirmation review conducted by a person other than the determining official?

☐ Yes

☐ No

If "No" explain:

7. Were households with foster children verified correctly?

☐ Yes

☐ No

If "No" explain:

8. Were the notifications of changes in eligibility to families sent in a timely manner?

☐ Yes

☐ No

If "No" explain:

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9. Were applications that did not need to be verified replaced by similar applications to meet the required number to be verified?

☐ Yes

☐ No

If "No" explain:

10. Was the option to decline to verify no more than 5 percent of applications in the selected sample utilized by the district?

☐ Yes

☐ No

If "Yes" explain:

11. Check this box if all calls within the district are local calls: ☐

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12. Was there a second attempt to obtain the family information for verification?

- ☐ Yes
☐ No
☐ Not applicable

If "No" explain:

a. If unable to verify the eligibility, after a reasonable period was a notice of adverse action sent to the families?

- ☐ Yes
☐ No

If "No" explain:

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13. If there was a benefit change due to verification, was it properly applied in the lunchroom (ticket, roster, and/or other system)?

- ☐ Yes
- ☐ No
- ☐ Not applicable

If "No" explain:

14. Were any households selected for Verification for Cause?

- ☐ Yes
- ☐ No
- ☐ Not applicable

If "Yes" explain:

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For more information, visit the Connecticut State Department of Education's (CSDE) [Verification Procedures for School Nutrition Programs](#) webpage or contact the [school nutrition programs staff](#) at the Connecticut State Department of Education, 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/forms/verification/sample_verification_checklist.pdf.



Sample Verification Checklist

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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/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:

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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