Loc	cal Education Agency (LEA):	Date:			
1.	Type of Verification Conducted:				
	Standard Sample Size Alternate One Alternate	Two			
2.	Were the <i>Eligibility Manual for School Meals</i> and appropriate that the verification sample was chosen correctly? If "NO" explain:	te Operation	al Memoranda : Yes	followed	to ensure
3.	Was more than the required sample size verified? If "YES" explain:	[Yes	🗌 No	
4.	Were State Agency sample verification forms used? If "NO" explain:	C	Yes	🗌 No	
5.	Was the verification process completed by Nov. 15? If "NO" explain:	[Yes	🗌 No	
6.	Was a confirmation review conducted by a person other than	the determi	ning official? Yes	🗌 No	
	If "NO" explain:	L			
7.	Were households with foster children verified correctly?	Г	Yes	🗌 No	
	If "NO" explain:	L			
8.	Were the notifications of changes in eligibility to families se	nt in a timely manner?			□ N/2
	If "NO" explain:				
9.	Were applications that did not need to be verified replaced by number to be verified? If "NO" explain:	y similar app Ves	olications to me	-	uired
10.	Was the option to decline to verify no more than 5% of appli district? If "YES" explain:	cations in th	e selected samp D No		d by the
11.	Check here if all calls within the district are local calls.				
12.	Was there a second attempt to obtain the family information for Verification? After a reasonable period, if unable to verify the eligibility, was a notice of adverse action sent to the families?				
	If "NO" explain:	Yes	🗌 No	1	∐ N/2
13.	If there was a benefit change due to verification, was it proper and/or other system)? If "NO" explain:	erly applied i	in the lunchroon		roster

Connecticut State Department of Education ♦ Child Nutrition Programs ♦ Revised 9/2012