Dear **insert name of local health department:**

The **(insert name of sponsoring agency)** would like to inform you of our intention to sponsor the Summer Food Service Program (SFSP). The SFSP is administered by the Connecticut State Department of Education, School Health, Nutrition and Family Services. SFSP regulations require that the local health department be notified of this intention, as well as the information listed below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and address of site** | **Delivery time** | **Available meals and serving time** | **Meal service dates** |
|  |  |  |  |
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|  |  |  |  |

Meals from the above sites are prepared at the following facility:

|  |  |
| --- | --- |
| Food preparation center**:** |  |
|  |  |

Sincerely,

**Insert name and tile of sponsoring organization representative**

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:

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

This institution is an equal opportunity provider.

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| For information on the SFSP visit the Connecticut State Department of Education’s [SFSP](https://portal.ct.gov/SDE/Nutrition/Summer-Food-Service-Program) website. This form is available at <https://portal.ct.gov/-/media/SDE/Nutrition/SFSP/Health_Inspection_Letter_SFSP.docx>. |