



GREATER CHICAGO FOOD DEPOSITORY

Child and Adult Care Food Program (CACFP) Application

Instructions: Please answer all questions and attach additional documentation.

SITE INFORMATION

Organization Name: _____

Program Address (full address): _____

Mailing Address (if different from program address): _____

	Name	Phone Number	Email Address
Primary Contact			
Secondary Contact			
Delivery Contact			
Director (if different than Primary above)			

Note: You must provide at least 2 different contact phone numbers.

Organization Type (i.e. school, faith-based, community, park district, etc.): _____

Note: Organization must have a 501c3 or be a public entity to qualify

Does your organization have a website? Yes ☐ No ☐ If yes, please list: _____

Is your organization currently a member of the Greater Chicago Food Depository? Yes ☐ No ☐

If yes, what is your agency code? _____

How long has your organization operated an after-school enrichment program? _____

Is your program open to all children despite race, color, national origin, sex, age, or disability? Yes ☐ No ☐

Note: A common example of this would be if your program is a "girls only" or "boys only" program.

How many children enrolled in your program are 12 years and under? _____

How many children enrolled in your program are 13 to 18 years? _____

Select all the education and/or enrichment activities offered to the students:

- ☐ Academic Assistance
- ☐ Service Learning Projects
- ☐ Life Skills
- ☐ Leadership Development
- ☐ Mentoring
- ☐ Cultural Diversity Activities
- ☐ Arts and Crafts Programs
- ☐ Wellness and Nutrition Activities
- ☐ Sports, Fitness, and Recreation
- ☐ Other

SITE ELIGIBILITY

What is the name of the closest public elementary school to your site? _____

Note: The closest school to your site must have 50% or more children who are eligible for free or reduced lunch.

Has this institution ever been identified through its corporate organization, officers, employees, or otherwise, as seriously deficient in any Federal or state child nutrition program? Yes ☐ No ☐

If yes, please explain: _____

SITE OPERATION INFORMATION

What is your first date of program? _____ What is the average number of participants? _____

What is your last date of program? _____ What is the maximum number of participants? _____

Which type of site would you like to be?

- ☐ Open Site – *Meal service is open to all the children in the community. Children are not required to be enrolled..*
☐ Closed Enrolled – *Meal service is only available to children enrolled in a formal program.*

What are your facility hours? _____ to _____ What are your program hours? _____ to _____

Please state the number of meals your program will need.

	Number of Snacks	Number of Suppers
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

What time would you like to serve the meals? *Please note that meal service cannot exceed 2 hours. Either meal can be served first. There must be 2 hours between the beginning of one meal service and the beginning of the next meal service.*

	PM Snack	Supper
Meal Service Start Time		
Meal Service End Time		

Type of Meals you would like to receive: Cold Meals ☐ Hot Meals* ☐

***For hot meals**, your site must have 2 certified food handlers on site. Copies of licenses must be included with this application. Your site must have the capability to store, heat and serve the meals from the Food Depository.

If CPS (or your public school district) closes due to inclement weather (i.e. a snow day or a cold day, NOT holidays), will your site be closed? No ☐ Yes* ☐ *By responding yes, we will automatically cancel meal service when CPS (or your public school district) announces that they will be closed due to inclement weather (i.e. a snow day or a cold day).*

SITE PROCEDURES

Does your site have a refrigeration unit that can accommodate the number of meals you would like to serve?

Yes ☐ No ☐ If yes, how many meals can be held comfortably in the refrigeration unit? _____

Does your site have adequate facilities for delivery and/or holding of meals until time of service? Yes ☐ No ☐

SITE RESPONSIBILITIES *(Note: Please initial next to each responsibility to demonstrate your site will be able to meet the program requirements)*

- ☐ A minimum of 2 site staff, that will be on site for each meal service, will attend a mandatory Food Depository training before the start of meal service
- ☐ Site will store and serve food using safe food handling practices
- ☐ Site will serve meals to children at no cost to them at least 3 times per week
- ☐ Site will serve all components of the meal to children only at the scheduled time and approved location
- ☐ Site will maintain records for every meal service that will include: number of meals received, temperature of milk at delivery and meal service, attendance and the number of meals served
- ☐ Site will provide meal counts to the Food Depository on a daily basis using either Minute Menu (an online database) or email if necessary along with weekly attendance records
- ☐ Site will maintain program binder provided by the Food Depository with copies of meal count forms, signed delivery receipts, attendance records and temperature logs
- ☐ Site will be available to accept meal deliveries during delivery window and will confirm correct number of meals and temperature at point of delivery, and notify the Food Depository of any damaged and/or missing meals
- ☐ Site will notify the Food Depository of any program changes, or closures at least 1 week in advance
- ☐ Site will ensure that all children have equal access to meals
- ☐ Site will operate for a minimum of 3 days a week for a minimum of 4 weeks and will maintain a minimum of 20 children each day

The following documents MUST be submitted in order for your application to be considered complete:

- ☐ Fire Prevention Inspection from the past 12 months *(all sites)*
- ☐ Federal 501c3 Tax Exempt Determination Letter *(all sites)*
- ☐ Health Inspection from the past 12 months *(if new site)*
- ☐ If applying to serve hot meals, please attach copies of 2 City (if operating in Chicago) or State (if operating outside Chicago) food sanitation licenses

To the best of my knowledge, the information about my site is correct. I have read and understand my responsibilities as a CACFP site with the Food Depository should my site be approved for participation in the program.

Application completed by *(please print name and title)*

Signature

Date

Please submit completed application and attachments via email or fax to: Fax: 773-843-2748 Email: programs@gcfd.org If you have any questions or concerns while completing this application, please do not hesitate to call the Children's Programs Team at 773-247-3663 x 4050 or email programs@gcfd.org