



GREATER CHICAGO FOOD DEPOSITORY

2017 Summer Food Service Program (SFSP) Application

Instructions: Please answer all questions and attach additional sheets if necessary.

SITE INFORMATION

Organization Name: _____

Program Address (full address): _____

Mailing Address (if different from program address): _____

Instructions for Delivery Driver (if necessary for parking or access to site): _____

Employer Identification Number EIN (if applicable): _____ DCFS License Number (if applicable): _____

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

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

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

Is your organization a member of the Greater Chicago Food Depository (i.e. pantry, soup kitchen, shelter)? Yes ☐ No ☐ If yes, what is your agency code? _____

How many years has your organization operated a youth summer program? _____

What is the age range of the children in your program? _____

Please describe your summer program activities: _____

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: _____

Is your program open to all children despite race, color, national origin, sex, age, or disability? Yes ☐ No ☐ *Note: A common example of a program not open to all would be a program that is a "girls only" or "boys only" program. If no, please describe:* _____

SITE OPERATION INFORMATION

What is your first date of meal service? _____

What is your last date of meal service? _____

What is the average number of participants? _____

What is the maximum number of participants? _____

Which type of site would you like to be? *Please select one.*

☐ Open Site – Meal service is open to all the children in the community. Children are not required to be enrolled in the program.

☐ Closed Enrolled Site – Meal service is only available to children enrolled in a formal program.

Does your site anticipate on serving homeless children? Yes ☐ No ☐

What are your facility hours? _____ to _____

What are your program hours? _____ to _____

Please state the number of meals your program will need.

Please note: Breakfast and hot Lunch/Supper meals are delivered day ahead. Also, a site cannot select or serve more than 2 meals and lunch & supper are not a valid combination.

	Number of Breakfasts	Number of Lunches	Number of PM Snacks	Number of Suppers
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday (approved on a case-by-case basis)				
Total:				

What time would you like to serve the meals? **Please note that meal service cannot exceed 2 hours and a site cannot serve more than 2 meals.**

	Breakfast	Lunch	PM Snack	Supper
Meal Service Start Time				
Meal Service End Time				

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

***For cold meals**, your site's refrigeration unit must be able to easily store both the total number of meals and milks without constraints on the operation of the equipment.

****For hot meals**, meals are delivered a day ahead. Also, your site must have 2 certified food handlers on site. **Attach copies of 2 City (if operating in Chicago) or 2 State (if operating outside Chicago) food sanitation licenses with this application.** Your site must have the capability to store, heat and serve the meals from the Food Depository. Sites that serve hot meals are able to request shelf-stable lunches for field trips.

SITE PROCEDURES

Is the site serving meals outside? Yes ☐ No ☐ If yes, what are the alternate arrangements in case of inclement weather? _____

Does your site have a refrigeration unit that can accommodate the number of meals you would like to serve? Yes ☐ No ☐ If yes, please describe the type of refrigeration unit you have (i.e. house unit, commercial 2-door unit, walk-in, etc.) and how many meals you expect the refrigeration unit to hold? _____

Does your site have adequate tables and seating to accommodate the number of children your site expects to serve? Yes ☐ No ☐

Does your site have adequate adult staff and/or volunteers to accommodate the number of children your site expects to serve? Yes ☐ No ☐ If yes, how many? _____

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 and also complete a mandatory basic food handler training before the start of meal service

_____ Site will accept, inspect, 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, and number of meals served

_____ Site will provide meal counts to the Food Depository on a daily basis using either via Minute Menu (an online database) or email

_____ Site will maintain program binder provided by the Food Depository with copies of meal count forms, signed delivery receipts, and temperature logs

_____ Site will be available to accept and sign for deliveries during the delivery window of **8:00AM** to 20 minutes before the start of the first non-breakfast meal service

_____ Site will confirm correct number of meals and temperature at point of delivery, and notify the Food Depository immediately 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

_____ If site would like to provide shelf stable field trip meals, site will provide the Food Depository with a written list of all **confirmed** field trip dates and locations at the mandatory training session which occurs prior to the start of programming. *Note: Additional shelf stable meal requests will not be accommodated after training is completed.*

_____ Site will operate for a minimum of 20 days of service and maintain a minimum of 20 children each day. *Note: The Food Depository will review and accept sites that do not meet this requirement on a case by case basis. If you do not meet this minimum, what is your planned model: # of days _____ # of children _____*

To the best of my knowledge, the information about my site is correct. I have read and understand my responsibilities should my site be approved for participation.

Application completed by (please print name and title)

Signature

Date

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