

2009 Economic Stimulus Funding for NSLP Equipment Assistance

About the Program

Public Law 111-5, the American Recovery and Reinvestment Act of 2009 (ARRA), was signed into law by President Obama on February 17, 2009. The ARRA provides a one-time appropriation of \$100,000,000 out of which Arizona will receive \$2,208,964 for equipment assistance to local education agencies (LEAs) participating in the National School Lunch Program (NSLP). Local LEAs may competitively apply for NSLP equipment assistance grants. As stipulated in the ARRA, priority will be given to schools in which at least 50 percent of the students are eligible for free or reduced-priced meals.

USDA regulations at 7 CFR 3016.3 and Office of Management and Budget Circular A-87 define equipment for the purpose of NSLP equipment assistance grants as articles of nonexpendable, tangible personal property with a useful life of more than one year and a per unit acquisition cost of \$5,000 (or such lesser amount as the LEA uses when reporting equipment as assets in its financial statements). NSLP equipment assistance grant funds can be used to purchase equipment such as a walk in freezer for school food service use; whereas renovation of the food service area would fall under the category of construction costs which must be borne by the school district's general fund.

Schools selected for the Program:

- Must participate in the National School Lunch Program (NSLP). Schools must comply with the federal and state guidelines for operating the program.
- Must assure the equipment procured must be necessary, reasonable and allocable.
- Must fully expend their NSLP equipment assistance grants within three (3) months of the award.
- Must comply with any reporting requirements specified by the Public Law 111-5, the ARRA.
- Must receive grant funds at a sponsor level. If a LEA has multiple schools that receive the grant, the funds will be awarded at the LEA level for distribution to the selected schools.
- Must submit a grant application for each school applying. The school may apply for one or more of the four following focus areas. Please note that the grant proposal will be evaluated on different criteria for each of the four focus areas.

Focus Areas:

1. Equipment that lends itself to improving the quality of school foodservice meals that meet the dietary guidelines (e.g., purchasing an equipment alternative to a deep fryer such as tilting braising pan, steam jacket kettle, pressure-less steamer, pressure Steamer, convection microwave oven, convection oven, convection oven and steamer, grills.)
2. Equipment that improves the safety of food served in the school meal programs (e.g., cold/hot holding equipment, dish washing equipment, refrigeration, milk coolers, freezers, blast chillers, etc.)
3. Equipment that improves the overall energy efficiency of the school foodservice operations (e.g., purchase of an energy-efficient walk in freezer replacing an outdated, energy-demanding freezer. Additional examples: refrigeration, combined convection & microwave ovens.)
4. Equipment that allows LEAs to support expanded participation in a school meal program (e.g., equipment for serving meals in a non-traditional setting or to better utilize cafeteria space such as mobile carts, kiosks, self serve coolers, hot and cold lines, serving line with built in refrigeration, warming units.)

Participating Schools will:

- Receive funds on June 8, 2009.
- Receive reimbursement for the cost of purchasing the equipment.
- Purchase the equipment according to procurement guidelines and adhere to the Buy American Provision.

Applications will be scored using the following criteria:

- | | |
|--|-------------------|
| 1. School Percentage of Eligible Free/Reduced-Price Students | 500 points |
| 2. School and Lunch Data | 150 points |
| 3. Individual Focus Area Overview | 150 points |
| 4. Individual Focus Area Purchase Plan | <u>200 points</u> |

TOTAL 1000 points

Instructions for Submitting the Application

1. The grant submission is school (site) based. A grant application must be submitted through the ADE Grants Management system for each school separately, by **Friday, April 24, 2009**. Please print a copy of the application for the LEA's own records.
2. Complete application for 1 (or more) of the 4 focus areas. Indicate which focus area(s) the application pertains to by filling in the appropriate check box. If all of the questions are not answered, the application will be considered incomplete.
3. The signature page must be signed by the food service director, the school principal and the district superintendent (or equivalent positions as determined by the LEA).
4. The signature page and required attachments* must be mailed to:

Arizona Department of Education
School Health and Nutrition Programs
c/o Cara Peczkowski
1535 West Jefferson Street, Bin #7
Phoenix, Arizona 85007

*Focus Area 1 – No attachments required

*Focus Area 2 – Health Department Inspection report

*Focus Area 3 – Equipment Replacement plan; List of vendors, if applicable

*Focus Area 4 – No attachments required

Schools selected for the 2009 NSLP Equipment Assistant Grant, will be notified by Monday, June 8, 2009.

If you have any questions regarding the application process, please contact Cara Peczkowski at cara.peczkowski@azed.gov or 602-542-8703.

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2009 NSLP Equipment Assistance Grant Application

SCHOOL INFORMATION

Sponsor Name:	CTD:
Sponsor Address:	
School Name:	CTDS:
School Address: (if different than sponsor address)	

CONTACT INFORMATION

(Person designated to receive information regarding the Economic Stimulus Funding for the 2009 NSLP Equipment Assistance Grant)

Name:
Title:
Address:
Phone:
Email:

SCHOOL ELIGIBLE FREE/REDUCED STUDENTS – 500 POINTS

School Percentage of eligible Free/Reduced students as of October 2008:	
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Does the school serve as a central preparation site?	<input type="checkbox"/> Yes or <input type="checkbox"/> No
If multiple sites are served from the central site, list each site's eligible free/reduced percentages:	<hr/> <hr/> <hr/> <hr/>

SCHOOL DATA

1. Programs offered at school: (check all that apply)

- SBP
 NSLP
 ASCS
 SFSP

2. Meal Pattern (required, but not scored)

- Traditional
 Enhanced
 Nutrient Standard
 Assisted Nutrient Standard

3. Food Preparation Method: (required, but not scored)

- On-site
 Central Kitchen
 Satellite

- Caterer

Name of Caterer: _____

- Food Service Management Company

Name of FSMC: _____

4. Grades served by school: _____
(required, but not scored)

LUNCH DATA

For October 2008

1. School enrollment	
2. Serving days	
3. Number of free lunches claimed	
4. Number of reduced lunches claimed	
5. Number of paid lunches claimed	

5. Calculate School's **October 2008** Monthly Participation Percentage by categories in the chart:

	# claimed	÷	(# eligible x # serving days)	=	% Participation
FREE		÷	(x)	=	
REDUCED		÷	(x)	=	
PAID		÷	(x)	=	
ALL (F+R+P)		÷	(x)	=	

LUNCH DATA -CONTINUED

1. Calculate Average Monthly School Meal Equivalent in the chart – October 2008
(required, but not scored for Focus Areas 1-3)

	# claimed	x	Conversion Factors	=	Total
1. Lunch meals		x	1	=	
2. Breakfast meals	(___ x 2)	÷	3	=	
3. Snacks		÷	3	=	
4. Other food sales	\$ _____ (Revenue \$)	÷	(\$2.57 + \$0.2075)	=	
(add lines 1,2,3, & 4) Meal Equivalents =					

2. Calculate School Meals Per Labor Hour in the chart – October 2008
(required, but not scored)

Calculation:	(# of meals or meal equivalents)	÷	# of paid labor hours	=	Meals per labor hr
<i>Example</i>	<i>338</i>	<i>÷</i>	<i>24</i>	<i>=</i>	<i>14</i>
		÷		=	

3. School's geographical area: (check one) (required, but not scored)

Urban
 Rural
 Suburban

4. Indicate the frequency of deliveries:

Every other week
 Weekly
 Twice a week

5. Is the LEA a member of a Purchasing Co-Op:

Yes
 No

6. Provide the most recent date that the LEA purchased equipment and list the type of equipment: _____

7. If the LEA's proposal for equipment assistance can only be partially funded through the 2009 Equipment Assistance Grant, will additional LEA funds be available to complete the purchase plan?

Yes or No

FOCUS AREAS

(Check if applying)

- Focus Area 1** Equipment that lends itself to improving the quality of school foodservice meals that meet the dietary guidelines

What was your last SMI score?

- Meets Standards Meets Standards with Exceptions
 Does Not Meet Standards Does Not Meet Standards Needs Follow up

Please respond to the following questions. Answers will be used to score the application. The material should be well presented, well organized, complete, clear, and concise. Incomplete applications will not be considered.

Overview

Describe your school nutrition environment, including the goals from your local Wellness policies, nutrition standards, and vending.

Please include how the purchase of this equipment will:

1. Increase the School Meals Initiative compliance and improve upon your most recent SMI score

2. Improve the nutritional quality of reimbursable meals to ensure compliance with the dietary guidelines and indicate any potential increases in frequency of deliveries

Purchase plan

Describe the purchase plan summary and then identify the following key areas:

Equipment: _____

New or Replacement

Total requested funds: \$ _____

Equipment installation plan (Timeline included):

Explain the availability of existing State and local funding for equipment purchases:

LEA's current food service budget and operating balance: \$ _____

Focus Area 2 Equipment that improves the safety of food served in the school meal programs

What was the date and score of the last Health Department inspection?

Date:	
Score:	

**Please submit a copy of your last Health Department inspection.*

Do you have a Food Safety Plan/HACCP plan in place? Yes or No

Please respond to the following questions in the space provided. Your answers will be used to score your application. The material should be well presented, well organized, complete, clear, and concise. Incomplete applications will not be considered.

Overview

Describe your school's current food safety status, including any corrective action from your health department inspection report.

Please include how the purchase of this equipment will:

1. Increase Food Safety Plan/HACCP plan compliance

2. Improve the safety of food served in the school meal programs

Purchase plan

Describe the purchase plan summary and then identify the following key areas:

Equipment: _____

New or Replacement

Total requested funds: \$ _____

Equipment installation plan (Timeline included):

Explain the availability of existing State and local funding for equipment purchases:

LEA's current food service budget and operating balance: \$ _____

Focus Area 3 Equipment that improves the overall energy efficiency of the school foodservice operations

What is the equipment and **the age** of the equipment that would be replaced? _____
(If multiple pieces are to be replaced, please list each piece and age)

Prior to the 2009 Equipment Assistance Grant, was an equipment replacement plan in place for the school? YES or NO

If yes, please submit a copy of the replacement plan.

Provide the list of equipment vendors who the LEA has worked with in the past

Please respond to the following questions in the space provided. Your answers will be used to score your application. The material should be well presented, well organized, complete, clear, and concise. Incomplete applications will not be considered.

Overview

Describe the school's equipment inventory status, including any new purchases within the last five years.

Please include:

1. The estimated annual energy savings (dollars) from the purchase of the new equipment
2. Prior to the 2009 Equipment Assistance Grant, when was the equipment the LEA is requesting scheduled to be replaced (normal replacement timeframe)?

Purchase plan

Describe the purchase plan summary and then identify the following key areas:

Equipment: _____

New or Replacement

Total requested funds: \$ _____

Equipment installation plan (Timeline included):

Explain the availability of existing State and local funding for equipment purchases:

LEA's current food service budget and operating balance: \$ _____

Focus Area 4 Equipment that allows LEAs to support expanded participation in a school meal program

To demonstrate LEAs margin for a potential increase in participation, use the Meal Equivalents, as calculated under the “Lunch data” section to complete chart:

Meal Equivalents	÷	October 2008 serving days	÷	October 2008 enrollment	=	Participation
	÷		÷		=	

Please respond to the following questions in the space provided. Your answers will be used to score your application. The material should be well presented, well organized, complete, clear, and concise. Incomplete applications will not be considered.

Overview

Describe your school’s current meal service plan and proposed meal service expansion proposal to increase reimbursable meal service.

Please include how the purchase of this equipment will:

1. Serve meal in a non-traditional setting

2. Better utilize meal service space

Purchase plan

Describe the purchase plan summary and then identify the following key areas:

Equipment: _____

New or Replacement

Total requested funds: \$ _____

Equipment installation plan (Timeline included):

Explain the availability of existing State and local funding for equipment purchases:

LEA’s current food service budget and operating balance: \$ _____

**Economic Stimulus Funding for NSLP
2009 Economic Stimulus Funding for NSLP Equipment Assistance**

Signature Page

Signatures

All original signatures in blue ink are required.

We have reviewed this application and attest to the information provided. If selected, we agree to implement the program in a manner consistent with the policies and procedures established by USDA. Further, we agree to participate in USDA and/or State sponsored trainings and evaluations, and to provide the information requested by the specified deadlines.

Food Service Director:

_____	_____	_____
Print Name	Signature	Date

School Principal:

_____	_____	_____
Print Name	Signature	Date

District Superintendent:

_____	_____	_____
Print Name	Signature	Date