Prior to Program Agreement approval, provide the following information.

Estimate data on the ethnic and racial makeup of the population to be served. Please enter the number of individuals, not the percentage of the population to be served.

**Ethnicity:**

3. _____ Hispanic or Latino
4. _____ Not Hispanic or Latino

**Race:**

5. _____ American Indian or Alaskan Native
6. _____ Asian
7. _____ Black or African American
8. _____ Native Hawaiian or Other Pacific Islander
9. _____ White

10. Describe the efforts to be used to assure that minority populations have an equal opportunity to participate.

11. Describe efforts to be used to contact minority and grassroots organizations about the opportunity to participate.

12. List any Federal agencies currently providing financial support to the institution.

13. Has the Institution ever been found to be in noncompliance by those Federal agencies?
### ETHNIC AND RACIAL DATA FORM

| Institution Name: ___________________________ | Agreement # ______ |
| Site Name: __________________________________ |                     |
| Address: ____________________________________ |                     |
| Institution Contact: _________________________ |                     |

#### Section I. Ethnic Categories

<table>
<thead>
<tr>
<th>Category Description</th>
<th>Number of Participating Children or Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic or Latino.</td>
<td></td>
</tr>
<tr>
<td>Not Hispanic or Latino.</td>
<td></td>
</tr>
</tbody>
</table>

#### Section II. Race Categories (one or more categories may be selected for a participant)

<table>
<thead>
<tr>
<th>Category Description</th>
<th>Number of Participating Children or Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native.</td>
<td></td>
</tr>
<tr>
<td>Asian.</td>
<td></td>
</tr>
<tr>
<td>Black or African American.</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander.</td>
<td></td>
</tr>
<tr>
<td>White.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution’s Authorized Representative</th>
<th>Date</th>
</tr>
</thead>
</table>

---

**Note:** CACFP regulations require that each institution collect the ethnic and racial data from each site each year. This includes child care centers, family day care homes, adult day care centers, at-risk afterschool programs, outside-school hours care centers, and homeless shelters.

_The institution must retain ethnic and racial data for 3 years and must safeguard this information. The institution must have procedures on file for maintaining the confidentiality of data collected on individuals._

Revised 7/2013
ETHNIC AND RACIAL DATA FORM

Instructions for Completing the Ethnic and Racial Data Form

Ethnic and Racial Data Collection are required by FNS Instruction 113-1 Civil Rights Compliance and Enforcement – Nutrition Programs and Activities, Appendix B,F Data Collection,2 CACFP, (b) Collecting and Maintaining Actual Beneficiary Data

The institution may use participant/parent self-identification or visual identification or to determine a participant’s ethnic and racial category. Self-identification is the preferred method.

- To use the participant/parent self-identification method, the institution should take the information on Ethnic Identity and Race of Participant from the Income Eligibility Application form, if applicable and compile the information on the Ethnic and Racial Data Form.

- To use the visual identification method: by visual observation, using your best judgment, first count the number of children (or adults if adult day care) in each ethnic category.

  ETHNICITY: Each participant should be counted under only one category for ethnicity. The total number of participants marked under the ethnic category should equal the total number of participants in attendance on the day the form is completed. Record those numbers in Section I.

  RACE: Each participant may be counted under more than one category for race. The total number of participants marked under the race category may be a larger sum than the total number of participants in attendance on the day. Indicate the number of children or adults in care in each racial category in Section II.

- If using the visual identification method, institutions must notify the parents/guardians in writing before collecting the data. See sample of Notice of Annual Collection of Ethnic and Racial Data on nutritionnc.com. Click on Special Nutrition Programs, Child and Adult Care Food Program, Forms, Recordkeeping.

IMPORTANT!

The institution must retain ethnic and racial data for 3 years and must safeguard this information. Access to Program records containing ethnic/racial data should be limited to authorized personnel.

Revised 7/2013
PLEASE POST
NOTICE OF
ANNUAL COLLECTION OF ETHNIC AND RACIAL DATA

To Participants, Parent and Guardians:

(Name of Center) participates in the USDA Child and Adult Care Food Program. One of the requirements of this program is to collect ethnic and racial data on participants once a year.

This information is requested solely for the purpose of determining the institution’s compliance with federal civil rights laws. By providing this information, you will assist (Name of Center) in assuring that this program is administered in a nondiscriminatory manner.

Information directly from the parent or guardian (or individual in adult care programs) is the preferred method of obtaining ethnic and racial data. We collect this information from the income eligibility applications that are completed each year by parents, guardians or individuals when available.

If you do not wish to share this information, (Name of Center) will conduct a visual identification of each enrolled participant. This data is summarized in numbers only for statistical use. Individual names are not identified in the statistical summary.

If you have any questions about the annual collection of ethnic and racial data, please contact:

______________________________
Name of Authorized Representative and Title

______________________________
Name of Center/Program

______________________________
Contact Number

Date: _________________________

Requirement located in FNS Instruction 113-1, Civil Rights Compliance and Enforcement- Nutrition Programs and Activities, XII Data Collection and Reporting
SAMPLE CONFIDENTIALITY POLICY

Purpose
To establish a protocol to prevent unauthorized persons access to confidential data.

Policy
1. The ________________ shall maintain all data in the strictest confidence.
   (Insert title of responsible party)
2. All records containing confidential information will be maintained securely in locked files accessible only to representatives of ________________
   (Institution’s Name).
3. Ethnic and racial data are used for reporting purposes only and are not used for any discriminatory purposes.

Procedures
1. The following data is collected for each participant upon enrollment and annually thereafter while participating in the Child and Adult Care Food Program (CACFP) and is considered confidential.
   - Ethnic Data
   - Racial Data
   - Income Eligibility Data
2. Data is stored in ________________
   (specify location)
3. Access to data is restricted to the following staff (list positions with access to data):
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
4. Ethnic and racial data is used for reporting purposes only.
5. Data collected will be maintained on file for 3 years.
6. At the end of the retention period, data shall be destroyed on site (for example: shredded and discarded).
CHILD AND ADULT CARE FOOD PROGRAM
MEDIA RELEASE
Child Care Centers, Adult Day Care Centers, Sponsoring Organizations of Centers, Outside School Hours Care Center

1. AGREEMENT NUMBER: __________________________

The __________________________ announces their participation in the U.S. Department of Agriculture funded Child and Adult Care Food Program. Meals will be available at no separate charge to enrolled participants. The income guidelines for free and reduced price meals by family size are listed on the back of this sheet. Children who are TANF recipients or who are members of SNAP or FDPIR households or are Head Start participants, are automatically eligible to receive free meal benefits. Adult participants who are members of food stamp or FDPIR households or who are SSI or Medicaid participants are automatically eligible to receive free meal benefits.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) To file a Civil Rights complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at https://www.ascr.usda.gov/complaint_filing_cust1.pdf, or at any USDA Office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

For Institution Use Only
Sent To: Media Outlets Date

_________________________ __________________________

Instructions on the Reverse Side
Routing: Submit original to media outlet and one copy to State Agency with current income guidelines. Retain one copy for your files.

Media Release
Nutrition Services (6/13)
This media release should only be completed by the following institution types:
  o Child Care Centers
  o Adult Day Care Centers
  o Sponsoring Organizations of Centers
  o Outside School Hours Care Centers

All institution types are required to submit a media release for FY 2013-2014. The State Agency will NOT issue a state wide media release for FY 2013-2014.

This is a two page document; submit the media release and the Income Eligibility Guidelines

1. **Agreement Number**: Provide the 4 digit agreement number for the institution.

2. **Institution Name**: Provide the name of the institution.

3. **Media Outlets**: Provide the name of at least one media outlet to which this release was sent.

4. **Date**: Provide the date the complete media release was sent to the media outlet.

5. **Income Eligibility Guidelines**: Page 2 of this document. Submit a copy of the income eligibility guidelines.

6. Submit original Media Release (with current income guidelines) to media outlets and one copy of Media Release and current income guidelines to State Agency. Retain one copy for your files.
5. Income Eligibility Guidelines

**EFFECTIVE JULY 1, 2013 - JUNE 30, 2014**

THE FOLLOWING HOUSEHOLD SIZE AND INCOME STANDARDS ARE USED TO DETERMINE ELIGIBILITY:

<table>
<thead>
<tr>
<th>HOUSEHOLD SIZE</th>
<th>YEARLY Free</th>
<th>YEARLY Reduced</th>
<th>MONTHLY Free</th>
<th>MONTHLY Reduced</th>
<th>TWICE PER MONTH Free</th>
<th>TWICE PER MONTH Reduced</th>
<th>EVERY TWO WEEKS Free</th>
<th>EVERY TWO WEEKS Reduced</th>
<th>WEEKLY Free</th>
<th>WEEKLY Reduced</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>14,937</td>
<td>21,257</td>
<td>1,245</td>
<td>1,772</td>
<td>623</td>
<td>886</td>
<td>575</td>
<td>818</td>
<td>288</td>
<td>409</td>
</tr>
<tr>
<td>2</td>
<td>20,163</td>
<td>28,694</td>
<td>1,681</td>
<td>2,392</td>
<td>841</td>
<td>1,196</td>
<td>776</td>
<td>1,104</td>
<td>388</td>
<td>552</td>
</tr>
<tr>
<td>3</td>
<td>25,389</td>
<td>36,131</td>
<td>2,116</td>
<td>3,011</td>
<td>1,058</td>
<td>1,506</td>
<td>977</td>
<td>1,390</td>
<td>489</td>
<td>695</td>
</tr>
<tr>
<td>4</td>
<td>30,615</td>
<td>43,568</td>
<td>2,552</td>
<td>3,631</td>
<td>1,276</td>
<td>1,816</td>
<td>1,178</td>
<td>1,676</td>
<td>589</td>
<td>838</td>
</tr>
<tr>
<td>5</td>
<td>35,841</td>
<td>51,005</td>
<td>2,987</td>
<td>4,251</td>
<td>1,494</td>
<td>2,126</td>
<td>1,379</td>
<td>1,962</td>
<td>690</td>
<td>981</td>
</tr>
<tr>
<td>6</td>
<td>41,067</td>
<td>58,442</td>
<td>3,423</td>
<td>4,871</td>
<td>1,712</td>
<td>2,436</td>
<td>1,580</td>
<td>2,248</td>
<td>790</td>
<td>1,124</td>
</tr>
<tr>
<td>7</td>
<td>46,293</td>
<td>65,879</td>
<td>3,858</td>
<td>5,490</td>
<td>1,929</td>
<td>2,745</td>
<td>1,781</td>
<td>2,534</td>
<td>891</td>
<td>1,267</td>
</tr>
<tr>
<td>8</td>
<td>51,519</td>
<td>73,316</td>
<td>4,294</td>
<td>6,110</td>
<td>2,147</td>
<td>3,055</td>
<td>1,982</td>
<td>2,820</td>
<td>991</td>
<td>1,410</td>
</tr>
</tbody>
</table>

For each Household member add: +5,226 +7,437 +436 +620 +218 +310 +201 +287 +101 +144.
SAMPLE

North Carolina Department of Health and Human Services
Division of Public Health
Women's & Children's Health Section
Nutrition Services Branch
Special Nutrition Programs

CHILD AND ADULT CARE FOOD PROGRAM
MEDIA RELEASE
Emergency Shelters, At-risk Afterschool Care Centers, and Sponsoring Organizations of Emergency Shelters, and Sponsoring Organizations of Day Care Homes

1. AGREEMENT NUMBER: ___________________________

The ___________ announces their participation in the U.S. Department of Agriculture funded Child and Adult Care Food Program. Meals will be available at no separate charge to enrolled participants. Children who are TANF recipients or who are members of SNAP or FDPIR households or are Head Start participants, are automatically eligible to receive free meal benefits.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) To file a Civil Rights complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA Office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at int great(underscore)usda(underscore)gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

For Institution Use Only
Sent To: ___________________________ Date: ___________

Institutions may be requested to submit this form to the State Agency for review.

4. ___________________________

Instructions on the Reverse Side

Routing: Submit original to media outlet and one copy to State Agency. Retain one copy for your files.
Instructions for Completing the Media Release for Institutions

- This media release should only be completed by the following institution types:
  - Emergency Shelters
  - At-risk Afterschool Care Centers
  - Sponsoring Organizations of Emergency Shelters
  - Sponsoring Organizations of Day Care Homes
- All institution types are required to submit a media release for FY 2013-2014. The State Agency will NOT issue a state wide media release for FY 2013-2014.

1. **Agreement Number:** Provide the 4 digit agreement number for the institution.

2. **Institution Name:** Provide the name of the institution.

3. **Media Outlets:** Provide the name of at least one media outlet to which this release was sent.

4. **Date:** Provide the date the complete media release was sent to the media outlet.
"The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (in Spanish).
USDA is an equal opportunity provider and employer.”
Building For the Future

This day care facility participates in the Child and Adult Care Food Program (CACFP), a Federal program that provides healthy meals and snacks to children receiving day care.

Each day more than 2.6 million children participate in CACFP at day care homes and centers across the country. Providers are reimbursed for serving nutritious meals which meet USDA requirements. The program plays a vital role in improving the quality of day care and making it more affordable for low-income families.

Meals  CACFP homes and centers follow meal requirements established by USDA.

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>Lunch or Supper</th>
<th>Snacks (Two of the four groups: )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milk</td>
<td>Milk</td>
<td>Milk</td>
</tr>
<tr>
<td>Fruit or Vegetable</td>
<td>Meat or meat alternate</td>
<td>Meat or meat alternate</td>
</tr>
<tr>
<td>Grains or Bread</td>
<td>Grains or bread</td>
<td>Grains or bread</td>
</tr>
<tr>
<td></td>
<td>Two different servings of fruits or vegetables</td>
<td>Fruit or vegetable</td>
</tr>
</tbody>
</table>

Participating Facilities  Many different homes and centers operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- **Child Care Centers**: Licensed or approved public or private nonprofit child care centers, Head Start programs, and some for-profit centers.
- **Family Day Care Homes**: Licensed or approved private homes.
- **Afterschool Care Programs**: Centers in low-income areas provide free snacks to school-age children and youth.
- **Homeless Shelters**: Emergency shelters provide food services to homeless children.

Eligibility  State agencies reimburse facilities that offer non-residential day care to the following children:

- children age 12 and under,
- migrant children age 15 and younger, and
- youths through age 18 in afterschool care programs in needy areas.

Contact Information  If you have questions about CACFP, please contact one of the following:

Sponsoring Organization/Center  CACFP Unit Manager,
Department of Health and Human Services
Division of Public Health
Nutrition Services Branch
1914 Mail Service Center
Raleigh, NC  27699
919-707-5799

USDA  USDA is an equal opportunity provider and employer
Esta guardería infantil diurna participa en el Programa de Alimentación Para Niños y Adultos en Guarderías (CACFP por sus siglas en inglés: Child and Adult Care Food Program) un programa Federal que provee comidas y bocadillos saludables a niños y a adultos en guarderías diurnas.

Todos los días, más de 2.6 millones de niños participan en el programa del CACFP en centros y en hogares de familia para el cuidado de niños. Los proveedores son reembolsados por servir comidas nutritivas que cumplan con los requisitos establecidos por el Departamento de Agricultura de los Estados Unidos (USDA). El programa juega un papel vital al mejorar la calidad de las guarderías y al ponerlas guarderías al alcance económico de familias de bajos recursos.

Alimentos

Hogares y centros del CACFP siguen los patrones alimentarios establecidos por USDA.

<table>
<thead>
<tr>
<th>Desayuno</th>
<th>Almuerzo o Comida</th>
<th>Bocadillos (Dos de los cuatro grupos)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leche</td>
<td>Leche</td>
<td>Leche</td>
</tr>
<tr>
<td>Fruta o verdura</td>
<td>Carne o un alternativo de carne</td>
<td>Carne o un alternativo de carne</td>
</tr>
<tr>
<td>Granos o pan</td>
<td>Granos o pan</td>
<td>Granos o pan</td>
</tr>
<tr>
<td></td>
<td>Dos porciones diferentes de frutas o verduras</td>
<td>Fruta o verdura</td>
</tr>
</tbody>
</table>

Establecimientos del CACFP

Muchos tipos de establecimientos diferentes operan el CACFP, compartiendo todos el objetivo común de brindar comidas y bocadillos nutritivos a sus participantes. Estos incluyen:

- **Centros de Cuidado de Niños (Child Care Centers)** Centros para el cuidado de niños, ya sean públicos o privados pero no lucrativos, que hayan sido licenciados o aprobados; programas del Head Start, y algunos centros para por lucro.
- **Hogares de Familia Para el Cuidado de Niños (Family Day Care Homes)** Hogares privados licenciados o aprobados.
- **Programas Escolares Después de Clases (Afterschool Care Programs)** Centros en áreas geográficas de bajos ingresos que proveen bocadillos gratis a niños de edad escolar y a jóvenes.
- **Centros de Refugio Para Gente Sin Hogar (Homeless Shelters)** Centros de emergencia de refugio que proveen servicios residenciales y de comidas a niños sin hogares.

Elegibilidad

Agencias estatales reembolsan establecimientos que ofrecen cuidado no residencial a los siguientes niños:

- niños hasta los 12 años de edad,
- niños de familias migratorias hasta los 15 años de edad,
- jóvenes hasta los 18 años de edad en programas escolares después de clases en áreas de necesidad.

Para Más Información

Si está interesado en participar el el CACFP, por favor pongase en contacto con uno de los siguientes:

Organización Patrocinadora/Centro
CACFP Unit Manager
Department of Health and Human Services
Division of Public Health
Nutrition Services Branch
1914 Mail Service Center
Raleigh, NC 27699
919-707-5799

USDA es un proveedor y empleador que ofrece oportunidad igual a todos
Building for the Future

This child care receives Federal cash assistance to serve healthy meals to your children. Good nutrition today means a stronger tomorrow!

Meals served here must meet nutrition requirements established by USDA's Child and Adult Care Food Program.

Questions? Concerns?
Call USDA toll free: 1-866-USDA CND (1-866-873-2263)
Visit USDA's website: www.fns.usda.gov/cnd

United States Department of Agriculture
Food and Nutrition Service
FNS-317
June 2000
Revised June 2001

USDA is an equal opportunity provider and employer.
Esta guardería infantil recibe asistencia monetaria del gobierno federal para servir comidas nutritivas a sus niños. ¡Buena nutrición hoy significa un mañana más saludable!

Comidas servidas aquí deben de seguir los requisitos nutricionales establecidos por el programa "Child and Adult Care Food Program" del Departamento de Agricultura de los Estados Unidos (USDA por sus siglas en inglés).

¿Preguntas? ¿Inquietudes?

Llame gratuitamente a USDA al: 1-866-USDA CND (1-866-873-2263)

Visite el website de USDA: www.fns.usda.gov/cnd

United States Department of Agriculture
Food and Nutrition Service
FNS-317-S
June 2000
Revised June 2001

USDA es un proveedor y empleador que ofrece oportunidad igual a todos.
Date of Complaint: ____________________ Sponsor Number: ____________________

Name and address of Institution: _____________________________________________

Is this a Civil Rights Complaint: ( ) Yes ( ) No. If "Yes," please indicate the type of 
Civil Right Complaint:
( ) Race ( ) Sex ( ) Color ( ) Age ( ) National Origin ( ) Disability;
and give the date the civil right complaint was sent to the Food and Nutrition
Services__________
If "No," please state the nature of the complaint below:

Nature of Complaint: _______________________________________________________

Result of Investigation: ____________________________________________________

Is further Investigation Warranted? If "Yes," explain. ( ) Yes ( ) No

Investigator's Signature: ____________________ Date: ____________________

Unit Manager's Signature: ____________________ Date: ____________________

DHHS-CAC Complaint (1/12)
Nutrition Services
Multiple Webinar Participants Sign-In
Special Nutrition Programs Civil Rights Training

Date________________

Sponsor Name: ________________________________

Agreement Number: ________________________________

County:________________________________________

By the end of this session, participants will be able to:

1. Apply civil rights requirements and policies as they relate to the Special Nutrition Programs;
2. Describe the responsibilities, requirements, and procedures necessary to ensure compliance at the federal, state and local levels;
3. Identify minimum program requirements to ensure compliance;
4. Explain the Civil Rights Policy for the Special Nutrition Programs as outlined in FNS Instruction 113-1.

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td></td>
</tr>
</tbody>
</table>

Keep on file:
Make a certificate for all attendees:
Only submit one certificate with your SNP application.