**CHILD AND ADULT CARE FOOD PROGRAM APPLICATION PROCESS CHECKLIST**

**Independent Centers**

Please check (✓) each item after completion in the first column. Failure to accurately complete all required documents, and submit the required number of documents requested, including this checklist, may delay program approval.

<table>
<thead>
<tr>
<th>Form (Form No.)</th>
<th>Institution (use only)</th>
<th>SNP (use only)</th>
<th>Special Nutrition Programs (use only)</th>
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<tbody>
<tr>
<td><strong>CACFP Checklist</strong></td>
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<tr>
<td>Attachment A - General Terms and Conditions</td>
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<td>Attachment B - Certifications</td>
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<td>Attachment C - Notice of Certain Reporting and Audit Requirements, if applicable</td>
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<td>Attachment D - State Grant Certification</td>
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<td>Attachment E - Conflict of Interest Policy</td>
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<td>Advance Payment Request</td>
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<tr>
<td>Institution Application</td>
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<tr>
<td>Center Application (CAC 7)</td>
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<td>Current federal, state or local license or certification</td>
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<td>Media Release, (if approved after Nov. 30)</td>
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<td>Preaward Compliance</td>
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<td>Certification Regarding Other Publicly Funded Programs</td>
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<td>Truth of Applications and Names and Addresses</td>
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<td>CACFP Fact Sheet</td>
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</table>

The following forms will need to be included **ONLY** if you will be receiving catered meals

- Food Service Contract (DHHS CAC 16) (Public schools only)
  - Attachment A - General Terms and Conditions | ___ | ___ | ___ |
  - Attachment B - Certifications | ___ | ___ | ___ |
- Food Service Contract (DHHS CAC 17) (Food Service Management Company)
  - Attachment A - General Terms and Conditions | ___ | ___ | ___ |
  - Attachment B - Certifications | ___ | ___ | ___ |

Total Food Dollars $__________

You are not authorized to claim meal reimbursement until you receive the final approval letter from N.C. Department of Health and Human Services

**NC CARES FORMS (ELECTRONIC OR PAPER-CIRCLE ONE) YOU ARE ENCOURAGED TO ENTER THESE FORMS ELECTRONICALLY**

- Site/Facility Application (CAC-7)
- Statement of Authority (CAC-18)
- Institution Application
- Certification of Eligibility for Title XIX/XX Institutions (CAC 1C)

To be completed by SNP consultant:

- Date Received
- Date Returned if incomplete
- Date received from institution
- 2nd Date Returned if incomplete
- 2nd Date received from institution
- 3rd Date Returned if incomplete
- 3rd Date received from institution
- Date mailed to Raleigh
- Date received in Raleigh
- Date processed and routed for approval

DHHS CAC Checklist renewal 06/08

Routing: Original: SNP Program Files  Yellow: SNP Consultant
Please be sure to submit the correct number of copies of each required form to your SNP Regional Consultant.

CACFP Checklist – Submit Original and Yellow copies.

Attachments A-E. Please include the appropriate attachments (A-E) for your organization. State and Local Government Institutions must submit attachments A and B. Private for-profit and non-profit institutions must submit attachments A, B, C, and D and E. Please note that Attachment E (Notarized Conflict of Interest Policy) must be notarized—not the Conflict of Interest Policy. The Institution can sign and submit the conflict of interest policy on page 2 or can submit its own conflict of interest policy. The attachments must be signed by the same representative who signed the agreement.

Advance Payment Request – Only submit if you are requesting an advance.

Institution Application – Submit original and keep a copy for your files. If you are filing electronically, do not submit this form with your agreement packet.

Center Application or Facility Certification (DHHS CAC 7) - Submit original and keep a copy for your files. If you are filing electronically, do not submit this form with your agreement packet.

Current federal, state or local licensing or certification to provide day care services to participants - Submit One Copy.

Media Release - The Media Release is required. The State Agency submits a statewide media release for institutions approved on or before November 30. If your application packet is not approved on or before November 30, you must submit a media release with your packet. Refer to the sample in your application packet. It is not necessary to wait for the newspaper clipping or radio announcement before you mail it to this office. Submit One Copy. KEEP A COPY FOR YOUR FILES.

Preaward Compliance. Submit with packet. Keep a copy for your files.

Certification Regarding Other Publicly Funded Programs. Submit with packet. Keep a copy for your file

Certification Regarding Criminal Convictions. Submit with packet. Keep a copy for your file

Truth of Applications and Names and Addresses. Submit with packet. Keep a copy for your file

THE FOLLOWING FORMS NEED TO BE INCLUDED ONLY IF YOU WILL BE RECEIVING CATERED MEALS:

Agreement to Furnish Food Service (Public Schools) (DHHS CAC 16) Public school only - If your meals are catered from a public school, submit copy (with Attachments A and B) to the State Agency. Keep a copy for the school and keep a copy for your files.

Child and Adult Care Food Program Agreement to Furnish Food Service (DHHS CAC 17) Food Service Management Company - If your meals are provided by a Food Service Management Company submit copy (with Attachments A and B) to the State office, and Keep a copy for the FSMC and keep a copy for your files.