Verification and Independent Review

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CHILD NUTRITION PROGRAMS
ANNUAL WEBINAR SY 2023

VERIFICATION WEBINAR

Click here to view webinar.

Q & As

- 1. Is there a place to report Medicaid Reduced?
  - No. All Medicaid students are electronically matched.
- 2. Did I hear this correctly? We do not need to go in and check reapplied/approved after Nov. 15?
  - Correct. The Verification Summary Report may be updated any time before January 20, but verification must be complete no later than November 15. Households must be notified of any reduction in benefits and must be informed of their right to reapply for benefits at any time.

Agenda

- Verification
- Independent Review
- Verification Summary Report

Verification Guidance

Eligibility Manual for School Meals

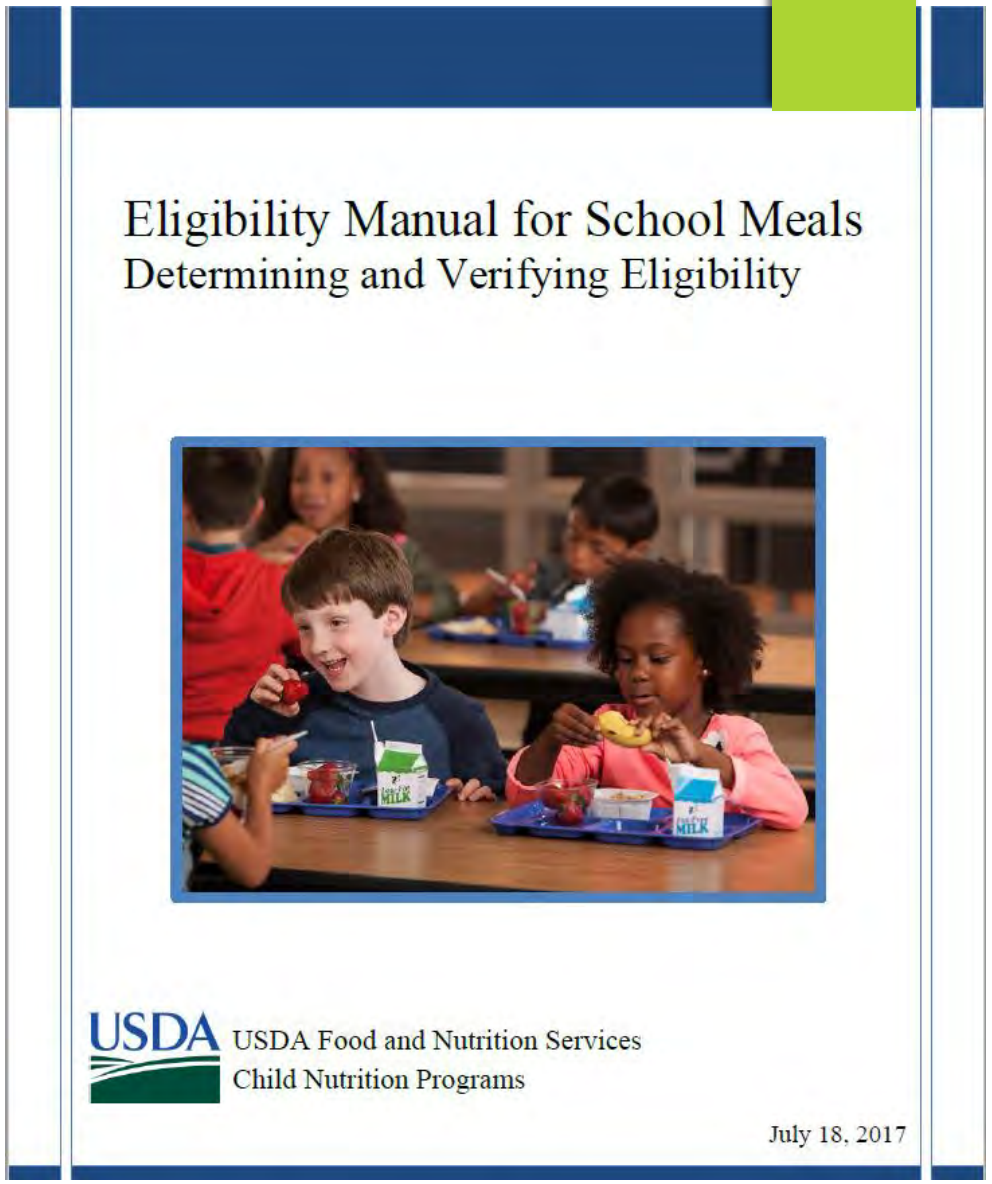
Determining and Verifying Eligibility

July 18, 2017, is most current copy

Section 6, Pages 96-117

Eligibility Manual for School Meals pdf link below

https://www.fns.usda.gov/eligibility-manual-school-meals



Independent Review

CRITERIA 1:

ALL LEAS WITH 3% OR MORE CERTIFICATION/BENEFIT ISSUANCE ERROR, AS DETERMINED BY THE STATE AGENCY DURING AN ADMINISTRATIVE REVIEW.

CRITERIA 2:

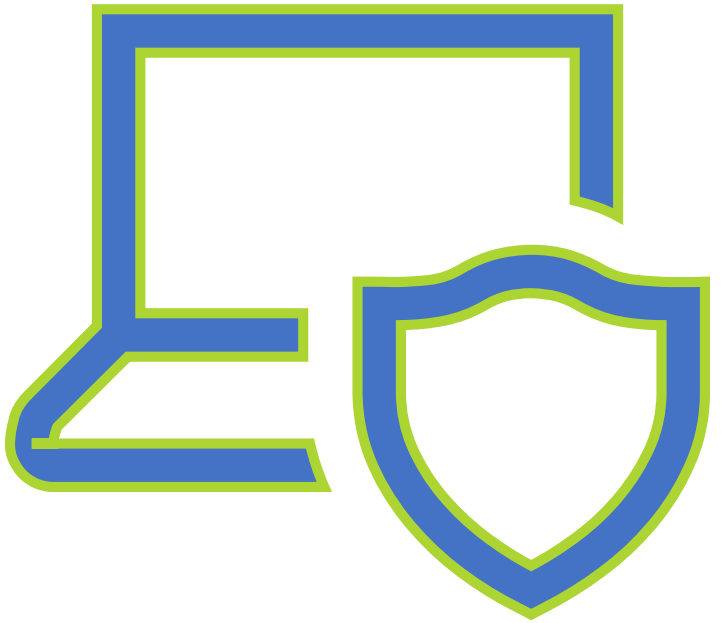
ALL LEAS IN THEIR FIRST YEAR OF OPERATION OF THE NATIONAL SCHOOL LUNCH PROGRAM.

Verification Summary Report

- All LEAs/Sponsors participating in NSLP must submit the Verification Summary report including:
  - Charter Schools
  - CEP districts
  - RCCIs
  - Public and Private Schools.
- Due date is January 20, 2023

School Year 2023 Verification Deadlines

- October 1 –Begin Verification
- November 15
  - Verification process must be complete.
  - If verification is not completed by November 15, the SFA must request an extension in writing from the State Agency. The extension may be granted up to December 15.
- January 20, 2023
  - Verification Summary report due date.



NOTE: Make sure you use the sample # on the VSR and compare it to your POS. Call if you have questions about the number of applications to verify.

What is Verification?

Confirmation of eligibility for free and reduced-price school meals based on applications.

Is not required for eligibility through direct certification.

Required annually by the USDA Reauthorization Act of 2004.

Verification Must Include

- Confirmation of income eligibility;
- If the child or any household member is receiving assistance under SNAP, FDPIR, or TANF, by the child or any member of the household;
- If the child is Other Source Categorically Eligible.
- May also include confirmation of any other information required on the application, such as household size.

Verification is Not Required **for…**

- Children certified under direct certification procedures including migrant, runaway, homeless, foster, and Head Start children.
- For children in RCCIs except for non-residential students attending the institution.
  - Verification Summary Report must be submitted.
- Districts/facilities where all schools participate in Community Eligibility Program (CEP).
  - Verification Summary Report must be submitted.

Verification is Not Required for:

- Schools participating in Special Milk
- CEP Schools
- Provision 2 schools in non-base year

Key Verification Terms

- *Direct Verification:* Use of records from public agencies to verify children's eligibility for free and reduced price benefits.
- *Error Prone:* Applications within $100 per month of the applicable IEGs.
- *Random Sampling:* A sampling process where each application has an equal chance of being selected. A statistically valid random sample is not required. The LEA must determine a selection interval by dividing the number of applications by the required sample size.
- *Sampling Pool:* The total number of applications approved as of October 1.
- *Sample Size:* The number of applications subject to verification. The minimum and maximum sample size is three percent of the total or 3,000 applications, whichever is less.

Verification "For Cause" Applications

"For cause" applications are not entered in 5-5.

The LEA has an obligation to verify all **questionable applications as "for cause."**

Any verification that is conducted "for cause" is in addition to the sample size required.

RULE FOR DEADLINES

If October 1 falls on a weekend

LEAs use the next operating day to establish the sample pool.

Establishing the Sample Size

Alabama's online application Verification Summary Report calculates the sample size for SFAs Based on line 5-3.

The two sample sizes are:

- Standard Sample Size: 3% of all applications or 3000 error applications approved by October 1.

- LEA must qualify and be on the list to use the Alternate Sample Size
  - Alternate Sample Sizes available:
    - Alternate One –
      - 3% of all applications or 3000 error applications approved by October 1 selected at random
    - Alternate Two –
      - 1% of all applications as of Oct. 1 or 1,000 of all applications approved selected from error prone applications.
      - PLUS, the lesser of 500 applications or ½% of applications that provide case numbers instead of income.

Establishing the Sample Size

See the Verification Summary Report

- When calculating the sample size, all fractions or decimals are rounded upward to the nearest whole number.
- The Sample Size must agree with 5-5 on the Verification Summary Report.
  - NOTE: If using a point-of-sale system to establish sample size, the SFA must check to be sure the number of applications to be verified agrees with 5-5.
- The LEA may not have enough applications that meet the criterion for sample sizes based on error prone applications.
  - When this happens, the LEA must select additional approved applications (Using a random sampling) to complete the required sample size.

Qualifying to Use an Alternate Sample Size

Lowered Non-Response Rate: Any LEA may use an alternate sample size for any school year when its non-response rate for the preceding school year was less than 20 percent.

Improved Non-Response Rate: An LEA with more than 20,000 children approved by application as eligible, as of October 1 of the school year, may use an alternate sample size for any school year when its non-response rate for the preceding school year was at least 10 percent below the non-response rate for the second preceding school year.

NOTE: The Alternate Sample Size list of LEAs that qualify will be emailed after the Verification Webinar.

Conducting Verification before October 1

SP42-2017 Beginning Verification Before October 1: Guidance to Local Educational Agencies

Post-Selection Procedures

Confirmation Reviews

- Prior to any other verification activity, a determining official must review each approved application selected for verification to ensure the initial determination was accurate.
- Any LEA that conducts a confirmation review of all applications at the time of certification is not required to conduct confirmation reviews prior to verification.
- The confirmation review must be done by an individual other than the individual who made the initial eligibility determination.

Optional: Replacement of Certain Applications

- After completing the confirmation reviews, the LEA may, on a case-by-case basis, replace up to five percent of applications selected.
  - Applications may be replaced when the LEA believes the household would be unable to satisfactorily respond to the verification request.

Post-Selection Procedures

- When an application is selected for verification and you determine the student(s) is on the direct certification list, the application does not have to be replaced in the verification sample pool.
  1. Mark the application as a direct certification.
  2. Include these applications in Field 5-5 on the Verification Summary Report (Number of applications selected for verification).
  3. Indicate the number of applications that are being converted to direct certification in the comments portion.

WE MUST CHECK YOUR APPLICATION

You must send the information we need, or contact [name] by [date], or your child(ren) will stop getting free or reduced price meals.

School: _____ Date: _____

Dear _____:

We are checking your Free and Reduced Price School Meals Application. Federal rules require that we do this to make sure only eligible children get free or reduced price meals. You must send us information to prove that **[name(s) of child(ren)][is/are]** eligible.

If possible, send copies, not original papers. If you do send originals, they will be sent back to you only if you ask.

1. IF YOU WERE RECEIVING BENEFITS FROM **[State SNAP]**, **[State TANF]** OR **[FDPIR]** WHEN YOU APPLIED FOR FREE OR REDUCED PRICE MEALS, OR AT ANY TIME SINCE THEN, SEND US A COPY OF ONE OF THESE:

Household Notification of Selection Letter:

Household Notification of Selection Letter Must Include:

- An indication that the household was selected for verification.
- A modified Use of Information Statement as follows:
  - *The Richard B. Russell National School Lunch Act requires the information requested in order to verify your children's eligibility for free or reduced price meals. If you do not provide the information or provide incomplete information, your children may no longer receive free or reduced price meals.*
- The full current USDA Nondiscrimination Statement.
- If a child is receiving benefits based on income, a list of the types of acceptable information that may be provided to confirm current income:
  - Pay stubs;
  - Award letters from assistance agencies for benefits such as Social Security or SSI;
  - Support payment decrees from courts.

Household Notification of Selection Letter Must Include:

Medicaid DC information cannot be confirmed on an application – it must be an electronic match.

If a child is receiving benefits based on categorical eligibility, the household may provide proof that a child or any household member is receiving benefits under an Assistance Program or that a child is Other Source Categorically Eligible instead of providing income information.

A warning that information must be provided by a date specified by the LEA and that failure to do so will result in termination of benefits.

A notice that documentation of income or receipt of assistance may be provided from any point in time between the month prior to application and the time the household is required to provide income documentation.

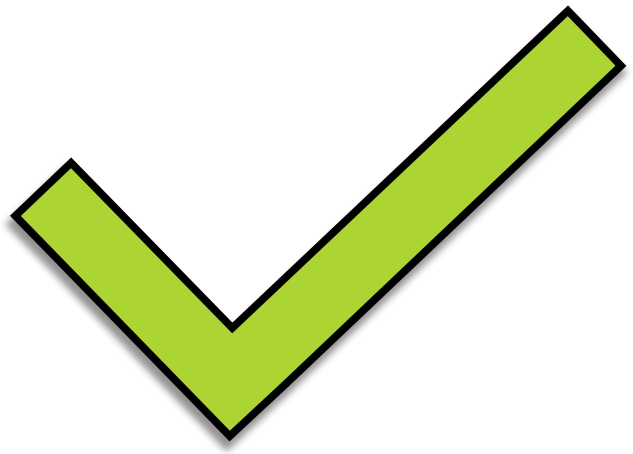
Household Notification of Selection Letter Must Include:

- The name of a determining official who can answer questions and assist households.
  - The household must be able to contact the LEA or school official who can either assist them directly or who can refer the caller to a specific person for help or If the household is unable to obtain assistance during their initial call, the LEA or school official must attempt to initiate further assistance.
- A telephone number the household can call at no cost for assistance. The LEA may establish a toll-free number or allow the household to reverse the charges if any households in that LEA are outside the local calling area.
- The LEA may also provide different telephone numbers for each local calling area within the LEA.

Household Notification: Language Assistance

- Any communications with households concerning verification must be in an understandable and uniform format and, to the maximum extent practicable, in a language that parents and guardians can understand.
- State agencies and LEAs are expected to have a system in place to provide written verification notices in the parent or guardian's primary language, and to provide oral assistance if the parent or guardian has difficulty understanding the written request.

Sources for Verification



- A household selected for verification, must provide "sources of information" to the LEA to confirm current income or participation in a categorically eligible program such as:
  - written evidence, collateral contacts, and a system of records.
- Households which dispute the validity of information acquired through collateral contacts or a system of records must be given the opportunity to provide other documentation.

Written Evidence:

The primary source of eligibility confirmation for households:

- Pay stubs from employers
- Award letters from assistance agencies or other government agencies.

Collateral Contacts

- A person outside of the household who is knowledgeable about the household's circumstances and can confirm a household's income level or participation in Assistance Programs or Other Source Categorical Eligibility Programs.
- The verifying official must give the household the opportunity to designate the collateral contact.

Agency Records

- A household's eligibility may be confirmed using information maintained by other government agencies to which the State agency, LEA, or school has legal access.
- These records are not considered collateral contacts.
- Although Program regulations do not require LEAs to notify households of selection when verification is made through agency records, such agencies may have their own notification requirements.

Pay Stubs

Households may provide pay stubs with income from employment. If a weekly pay stub is representative of what the household normally receives each week, one pay stub is sufficient.

If the household submits a pay stub including overtime, the determining official should work with the household to determine whether the overtime for the month being verified is representative of overtime received in other months. If overtime is a one-time or sporadic source of income, income should be calculated based on the regular monthly income without overtime.

Indication of "No Income"

If a household is selected for verification, and the household's application indicates zero income, the LEA must request an explanation of how living expenses are met and may request additional written documentation or collateral contacts.

The collateral contact may be asked to document the duration and type of assistance that is provided to the household.

Verification Follow-Up

The LEA must make at least one attempt to contact the household when the household does not adequately respond to the request for verification.

"Non-response" includes no response and incomplete or ambiguous responses that do not permit the LEA to resolve a child's eligibility for free and reduced price meals.

The required follow-up attempt may be in writing (mail or e-mail) or by telephone or text message.

The LEA must document contact was attempted.

Additionally, the LEA must ensure LEP households are provided adequate language assistance and understand the need to respond to the verification request.

Verification Follow-Up

1. You must inform the household that failure to provide adequate written evidence or failure to designate an adequate collateral contact will result in termination of benefits;
2. Attempt to obtain the missing written evidence or collateral contact information; and
3. Contact the household to complete the verification process, if the collateral contact is unwilling or unable to provide the requested information.

Remember the deadline for completing verification is November 15.

Verification Follow-Up

After follow up, if the household responds and provides all needed evidence, verification is considered complete.

As appropriate, the LEA would complete verification by:

1. Informing the household there is no change in benefits;

2. Notifying the household its benefits will be increased; or

3. Sending notice of adverse action.

When Verification is Considered Complete

The household submits either adequate written evidence or collateral contact with justification of income or categorical eligibility.

The household submits either adequate written evidence or collateral contact justification of income indicating that the children should receive either a greater or lesser level of benefits.

Verification is considered complete for this household when the household is notified that its benefits will be increased or decreased. If benefits are decreased, a notice of adverse action must be sent before verification is considered complete.

The household indicates, verbally or in writing, that it no longer wishes to receive free or reduced-price benefits.

Verification is considered complete when the notice of adverse action is sent.

The application provided case numbers. It is determined that no household member is receiving benefits from an Assistance Program.

Verification is considered complete when the notice of adverse action is sent.

Notice of Adverse Action

WE HAVE CHECKED YOUR APPLICATION

School: _____ Date: _____

Dear _____:

We checked the information you sent us to prove that **[name(s) of child(ren)]** are eligible for free or reduced price meals and have decided that:

- ❑ Your child(ren)'s eligibility has not changed.
- ❑ Starting **[date]**, your child(ren)'s eligibility for meals will be changed **from reduced price to free** because your income is within the free meal eligibility limits. Your child(ren) will receive meals at no cost.
- ❑ Starting **[date]**, your child(ren)'s eligibility for meals will be changed **from free to reduced price** because your income is over the limit. Reduced price meals cost **[$]** for lunch and **[$]** for breakfast.
- ❑ Starting **[date]**, **your child(ren) is/are no longer eligible** for free or reduced price meals for the following reason(s):
  - ___ Records show that no one in your household received **[State SNAP]** or **[State TANF]** benefits.
  - ___ Records show that the child(ren) is/are not homeless, runaway, or migrant.
  - ___ Your income is over the limit for free or reduced price meals.
  - ___ You did not provide: _____
  - ___ You did not respond to our request.

Meals cost **[$]** for lunch and **[$]** for breakfast. If your household income goes down or your household size goes up, you may apply again. If you were previously denied benefits because no one in the household received **[State SNAP]**, **[State TANF]** or **[FDPIR]** benefits, you may reapply based on income eligibility. If you did not provide proof of current eligibility, you will be asked to do so if you reapply.

If you disagree with this decision, you may discuss it with **[name]** at **[phone]**. You also have the right to a fair hearing. If you request a hearing by **[date]**, your child(ren) will continue to receive free or reduced price meals until the decision of the hearing official is made. You may request a hearing by calling or writing to: **[name]**, **[address]**, **[phone number]**, or **[e-mail]**.

Sincerely,

[signature]

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly.

What if the household does not respond by November 15?

Notification of Adverse Action is sent to the household.

The household may reapply by completing a new Free and Reduced Meal Application.

The household must provide "sources of information" to confirm current income or participation in a categorically eligible program.

What if the SFA doesn't complete verification by November 15?

The SFA may request an extension up to December 15 to complete verification, due to natural disaster, civil disorder, strike, or other circumstances that prevent the LEA from timely completion of verification activities.

Any requests for an extension beyond December 15 must be submitted by the State agency to the USDA FNS for approval.

Independent Review

Independent Review of Applications Required by the Healthy, Hunger-Free Kids Act of 2010. Section 304 of the Healthy, Hunger-Free Kids Act of 2010 requires local educational agencies (LEAs) that demonstrate high levels of, or a high risk for administrative error associated with certification, verification and other administrative processes to conduct an independent review of the initial eligibility determinations for free and reduced price school meal applications for accuracy prior to notifying households of eligibility.

Independent Review

Independent Review must be conducted within 10 days of receipt of the Free and Reduced Price Meal Application.

Criteria 1:

All LEAs with 3% or more certification/benefit issuance error, as determined by the State agency during an administrative review.

Criteria 2:

All LEAs in their first year of operation of the National School Lunch Program.

Second Review

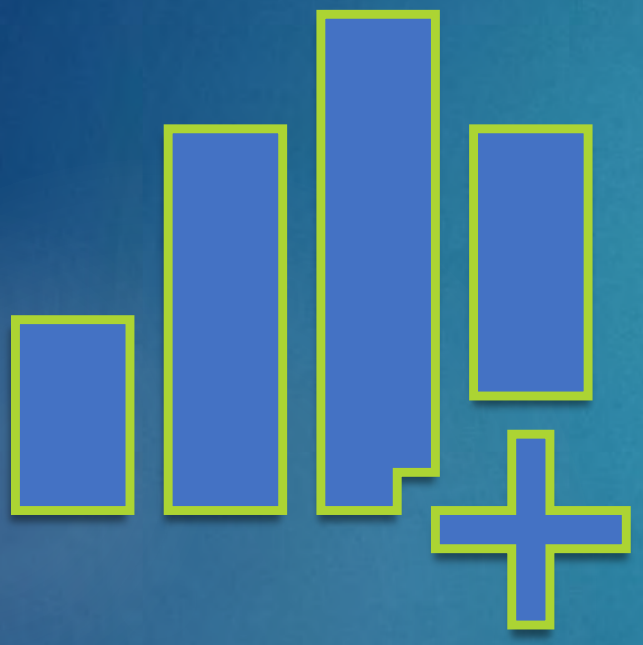
Independent Review is referred to in USDA memos and the Eligibility Manual for School Meals, as a second review.

A second review of applications requires a re-evaluation of the initial eligibility determination made by the original determining official, based on the information provided by the household on the application.

Independent Review

Determine whether the application is complete with:

- Signature of an adult household member;
- Last four digits of a Social Security Number (or an indication of "none") for income applications;
- Names of all household members, including the children for whom the application is made; and
- Identification of:
  - The amount of income received by each household member for income applications; or
  - The applicable Assistance Program and program case number; or
  - The applicable program, for applications based on Other Source Categorical Eligibility.
- Confirm the application was correctly approved based on the current IEGs or accurate categorical eligibility information, as applicable.



Verification Summary Report

Who Submits the Verification Summary Report?

- Charter Schools
- CEP Districts
- RCCIs,
- Public Schools
- Private Schools

Accessing the Online Verification Summary Report

- Log onto the CNP Online Application
- Select NSLP
- Select Forms
- Select Verification Summary
- Select Program Year 2023
- The LEA's Verification Summary Report page opens

Authority Levels for Online Verification

Authority levels must be set for Sponsor Users prior to accessing the online Verification Summary Report.

To set authority levels:

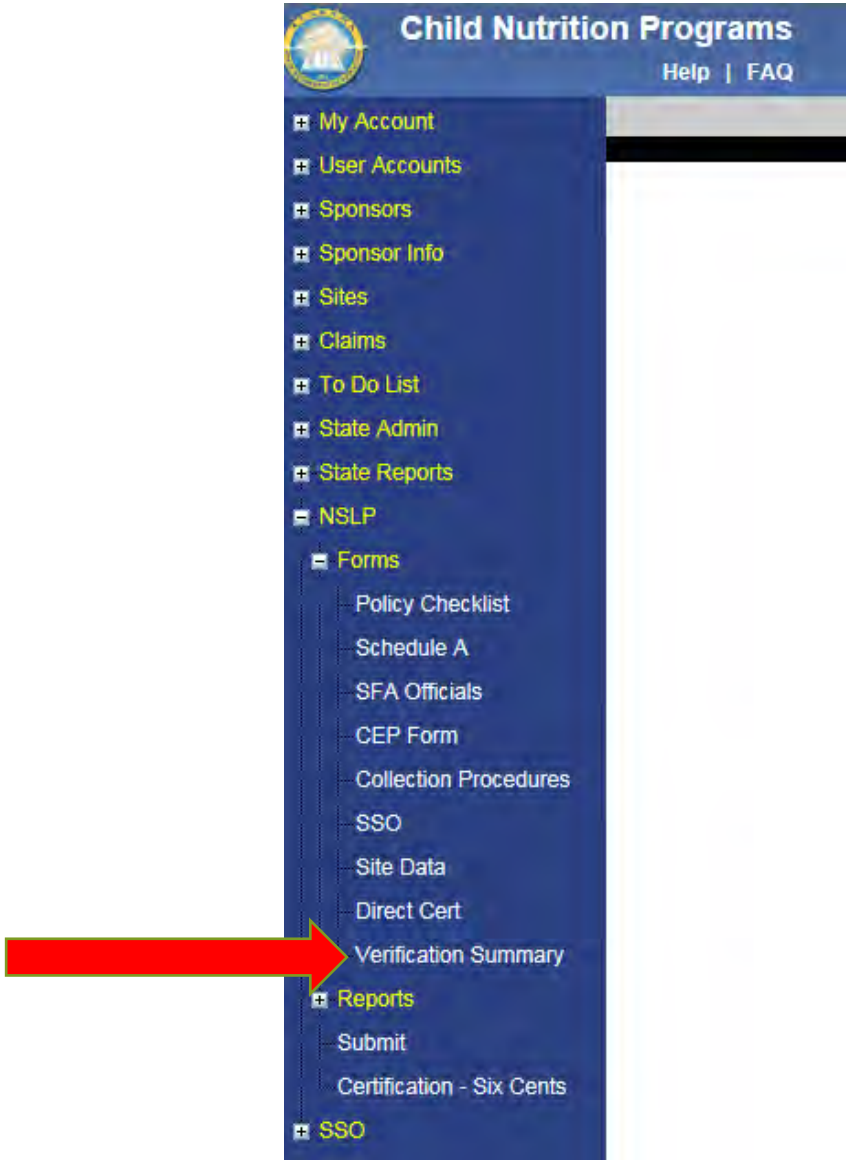
- Log on to the CNP Online Application
- Click User Account
- Click Edit User
- Click the Edit button next to the Sponsor User that is being edited
- Select the authority level appointed to the Sponsor User
- Click Update User

There are 3 levels of authority for verification:

- Editor
- Submitter
- Viewer

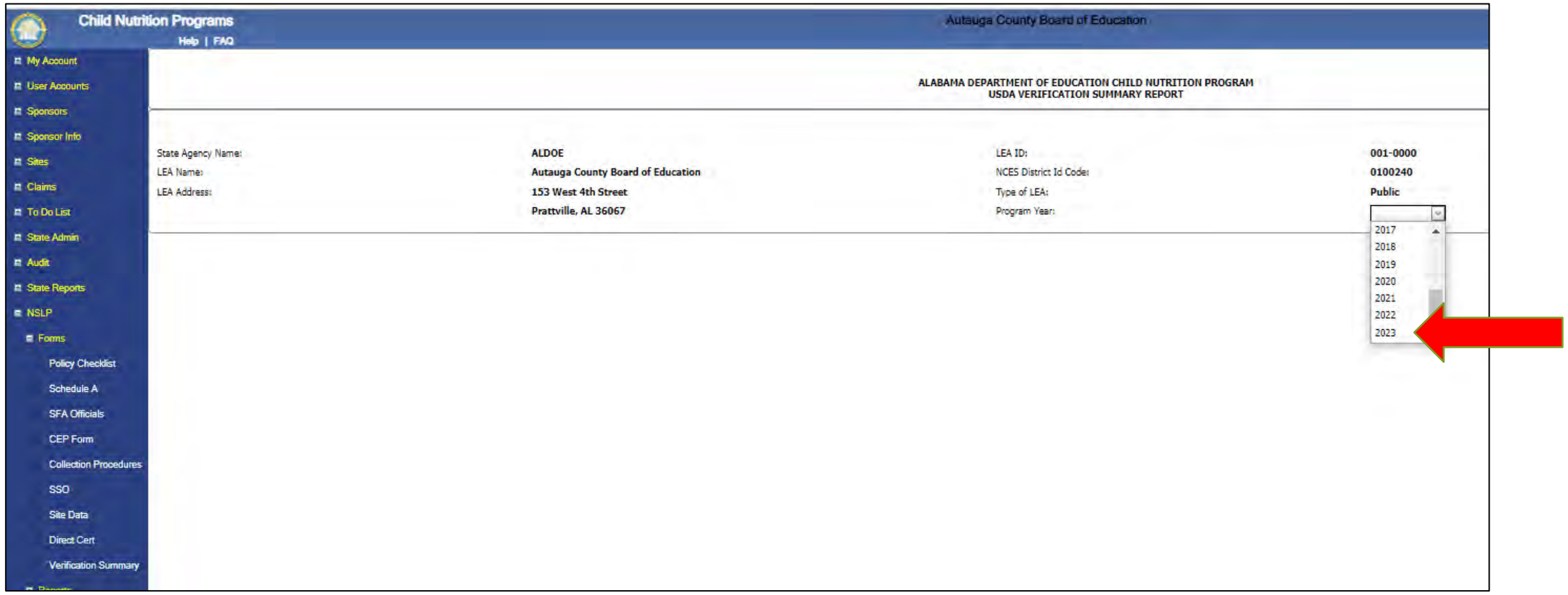
Section 1	Total Schools, Residential Child Care Institutions (RCCIs) and Enrolled Students	** All SFAs must report Section 1 **	A. Number of Schools OR Institutions (NSLP) As of Last Operating Day in October	B. Number of Students (NSLP) As of Last Operating Day in October	C. Number of Schools OR Institutions(SBP) As of Last Operating Day in October	D. Number of Students (SBP) As of Last Operating Day in October
		1-1 Total schools	3	1067	3	1067
		1-2: Total RCCIs				
		1-2a: RCCIs with day students (Report ONLY day students in 1-2aB) (Day students are those students NOT institutionalized and eligibility is determined individually by application or direct certification as applicable)				
		1-2b: RCCIs with NO day students				
		1-3 Total schools NON CEP and NON Provision 2/3:				
Section 2	SFAs with schools operating alternate provisions	** Only SFAs with alternate provisions must report Section 2 **	A. Number of Schools OR Institutions	B. Number of Students As of Last Operating Day in October	C. Number of Schools OR Institutions(SBP)	D. Number of Students (SBP) As of Last Operating Day in October
		2-1 Operating Provision 2/3 in a BASE year for NSLP and SBP:				
		2-2 Operating Provision 2/3 in a NON BASE year for NSLP and SBP:				
		2-2a: Provision 2/3 students reported as FREE in NON BASE year:				
		2-2b: Provision 2/3 students reported as REDUCED PRICE in NON BASE year:				
		2-3 Operating the Community Eligibility Option:	3	1067		
		2-4 Operating other alternatives for NSLP and SBP:				
		2-5 Operating other alternate provision(s) for only SBP or only NSLP:				
Section 3	Students approved as FREE eligible NOT subject to verification	** All SFAs must report Section 3 or check box 3-1 if applicable **		B. Number of Students (NSLP) As of Last Operating Day in October		
		3-1 Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP (i.e. NON BASE year Provision 2/3 for all schools) :				
		3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP): Do not include students certified with SNAP through the letter method.				
		3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), Medicaid (Free only), or those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2				
		3-4: Students directly certified categorically FREE eligible through SNAP letter method: include students certified for free meals through the family providing a letter from the SNAP agency				

Verification Summary Report for RCCIs & CEP/Provision 2 districts



Verification Summary Report

Verification Summary Report



Verification Summary Report

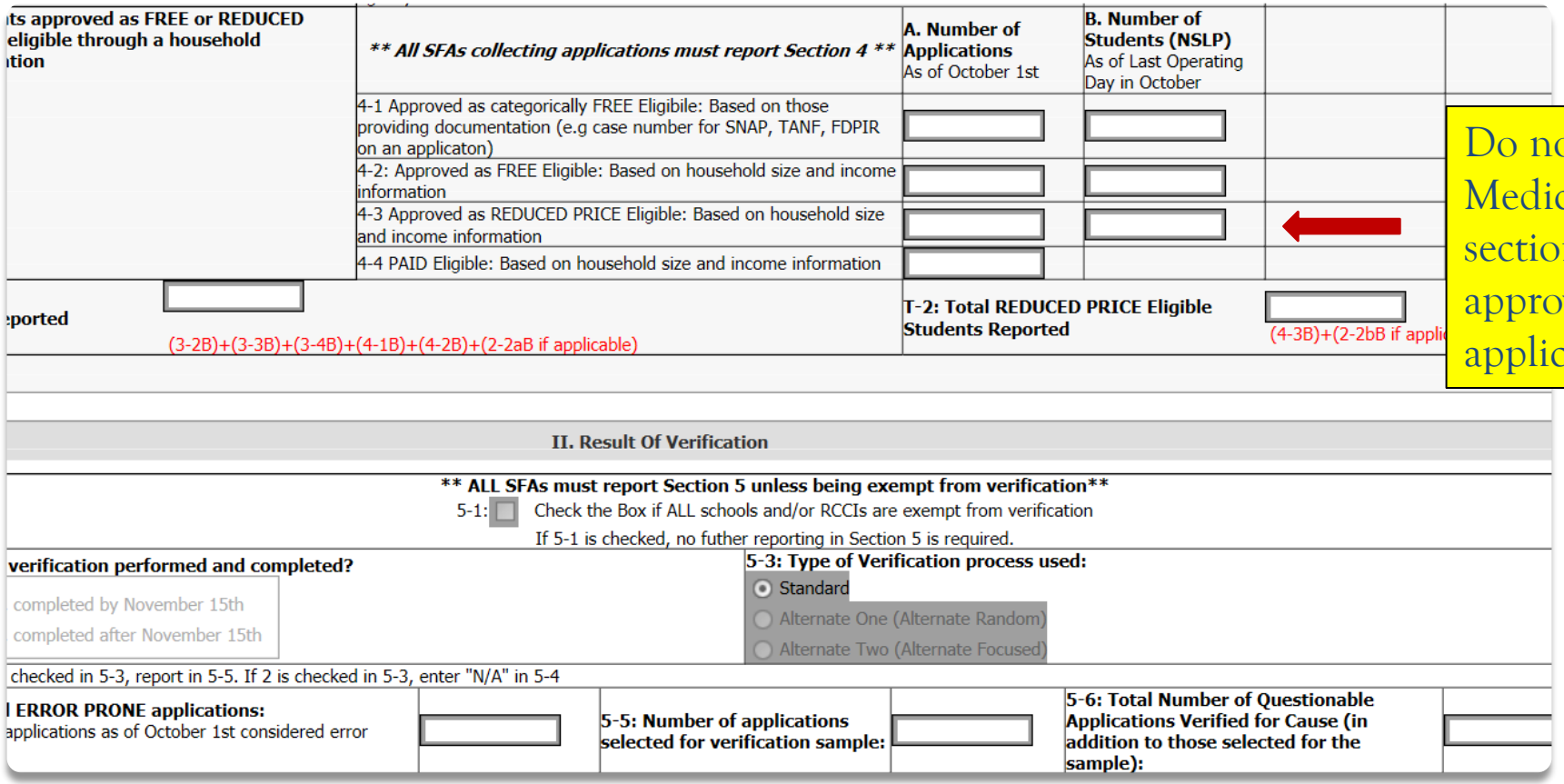
October 1: Open the Verification Summary Report.

- Complete Section 4 and Section 5
- Enter zeroes for Section 4, Column B (as placeholders)
- The Number of Applications selected for verification (5-5) will automatically populate.
- Set a calendar reminder for the last operating day of October

Last Operating Day of October

- Complete Sections 1-3 using numbers from the last operating day of October.
- Replace zeroes in Section 4, Column B with student numbers from the last operating day of October.

Sections 4 and 5



ts approved as FREE or REDUCED eligible through a household tion	** All SFAs collecting applications must report Section 4 **	A. Number of Applications As of October 1st	B. Number of Students (NSLP) As of Last Operating Day in October	
	4-1 Approved as categorically FREE Eligibile: Based on those providing documentation (e.g case number for SNAP, TANF, FDPIR on an applicaton)			
	4-2: Approved as FREE Eligible: Based on household size and income information			
	4-3 Approved as REDUCED PRICE Eligible: Based on household size and income information			
	4-4 PAID Eligible: Based on household size and income information			

eported (3-2B)+(3-3B)+(3-4B)+(4-1B)+(4-2B)+(2-2aB if applicable)

T-2: Total REDUCED PRICE Eligible Students Reported (4-3B)+(2-2bB if appli

Do not include Medicaid Reduced in section 4 only students approved reduced on application.

II. Result Of Verification

** ALL SFAs must report Section 5 unless being exempt from verification**

5-1: Check the Box if ALL schools and/or RCCIs are exempt from verification

If 5-1 is checked, no futher reporting in Section 5 is required.

verification performed and completed?

completed by November 15th

completed after November 15th

5-3: Type of Verification process used:

- Standard
- Alternate One (Alternate Random)
- Alternate Two (Alternate Focused)

checked in 5-3, report in 5-5. If 2 is checked in 5-3, enter "N/A" in 5-4

l ERROR PRONE applications: applications as of October 1st considered error		5-5: Number of applications selected for verification sample:		5-6: Total Number of Questionable Applications Verified for Cause (in addition to those selected for the sample):	

Sections 1-3

Only the cells applicable to the Sponsor are editable.

Section 1	**Total Schools, Residential Child Care Institutions (RCCIs) and Enrolled Students**	***** All SFAs must report Section 1 *****	**A. Number of Schools OR Institutions (NSLP)** As of Last Operating Day in October	**B. Number of Students (NSLP)** As of Last Operating Day in October	**C. Number of Schools OR Institutions(SBP)** As of Last Operating Day in October	**D. Number of Students (SBP)** As of Last Operating Day in October
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		1-2b: RCCIs with NO day students				
		1-3 Total schools NON CEP and NON Provision 2/3:				
Section 2	**SFAs with schools operating alternate provisions**	***** Only SFAs with alternate provisions must report Section 2 *****	**A. Number of Schools OR Institutions**	**B. Number of Students** As of Last Operating Day in October	**C. Number of Schools OR Institutions(SBP)**	**D. Number of Students (SBP)** As of Last Operating Day in October
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		2-2b: Provision 2/3 students reported as REDUCED PRICE in NON BASE year:				
		2-3 Operating the Community Eligibility Option:	3	1067		
		2-4 Operating other alternatives for NSLP and SBP:				
		2-5 Operating other alternate provision(s) for only SBP or only NSLP:				
Section 3	**Students approved as FREE eligible NOT subject to verification**	***** All SFAs must report Section 3 or check box 3-1 if applicable *****		**B. Number of Students (NSLP)** As of Last Operating Day in October		
		3-1 ☐ Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP (i.e. NON BASE year Provision 2/3 for all schools) :				
		3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP): Do not include students certified with SNAP through the letter method.				
		3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), Medicaid (Free only), or those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2				
		3-4: Students directly certified categorically FREE eligible through SNAP letter method: include students certified for free meals through the family providing a letter from the SNAP agency				
Section 4	**Students approved as FREE or REDUCED PRICE eligible through a household application**	***** All SFAs collecting applications must report Section 4. DO NOT include the counts of any students directly certified with any program (including Medicaid) *****	**A. Number of Applications** As of October 1st	**B. Number of Students (NSLP)** As of Last Operating Day in October		
		4-1 Approved as categorically FREE Eligible: Based on those providing documentation (e.g case number for SNAP, TANF, FDPIR on an applicaton)			Comment:	
		4-2: Approved as FREE Eligible: Based on household size and income information			Comment:	
		4-3 Approved as REDUCED PRICE Eligible: Based on household size and income information	0	0	Comment:	
		4-4 PAID Eligible: Based on household size and income information	0			

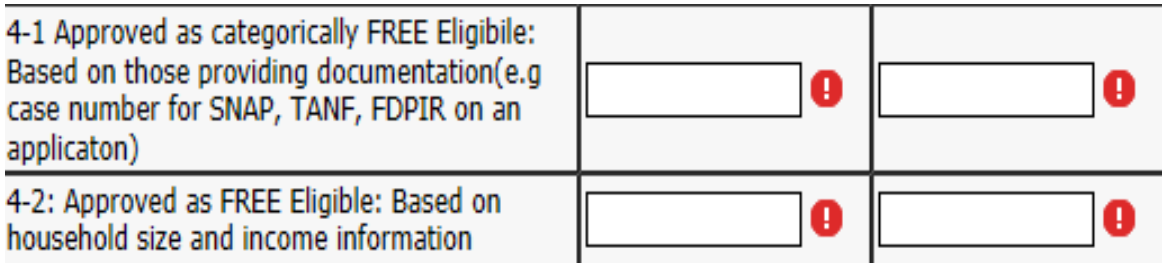
Only include Medicaid FREE (not reduced) in section 3-3 and

Saving Information Entered

To save the information that has been entered, scroll to the bottom of the form and click the Save button located on the bottom left corner.

Saving Information Entered

- Once the information entered has been saved, a red circle with a white exclamation point will appear beside any cell where an error was found or if no information was entered into the cell.
- All cells must have a number.

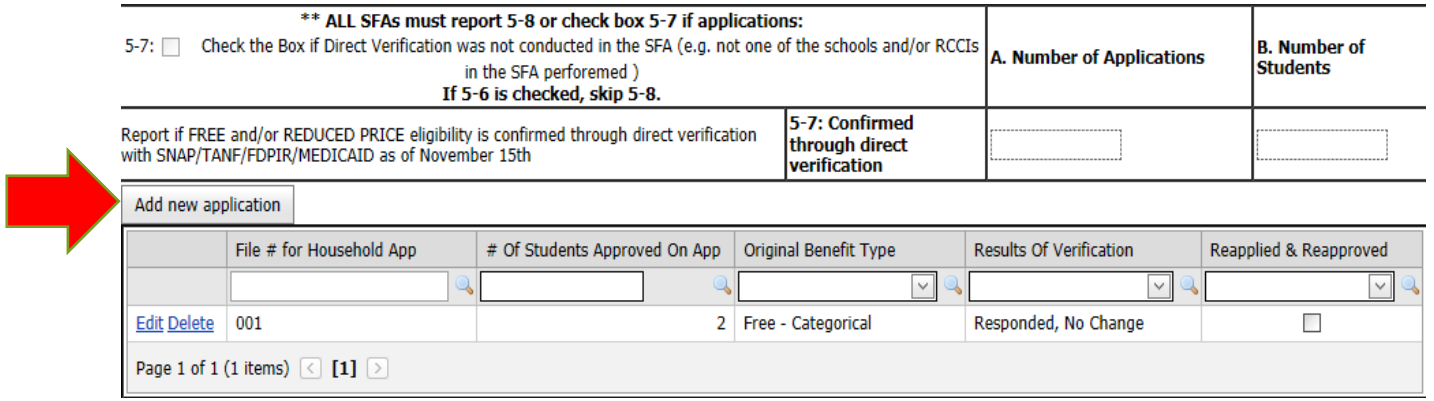


Correct the errors and save the Verification Summary Report again.

Adding Applications

Entering Data From Verified Applications

Click the "Add New Application" button to add applications.



** ALL SFAs must report 5-8 or check box 5-7 if applications: 5-7: ☐ Check the Box if Direct Verification was not conducted in the SFA (e.g. not one of the schools and/or RCCIs in the SFA perforemed) If 5-6 is checked, skip 5-8.		A. Number of Applications	B. Number of Students
Report if FREE and/or REDUCED PRICE eligibility is confirmed through direct verification with SNAP/TANF/FDPIR/MEDICAID as of November 15th	5-7: Confirmed through direct verification		

Add new application

	File # for Household App	# Of Students Approved On App	Original Benefit Type	Results Of Verification	Reapplied & Reapproved
Edit Delete	001	2	Free - Categorical	Responded, No Change	☐

Page 1 of 1 (1 items) [1]

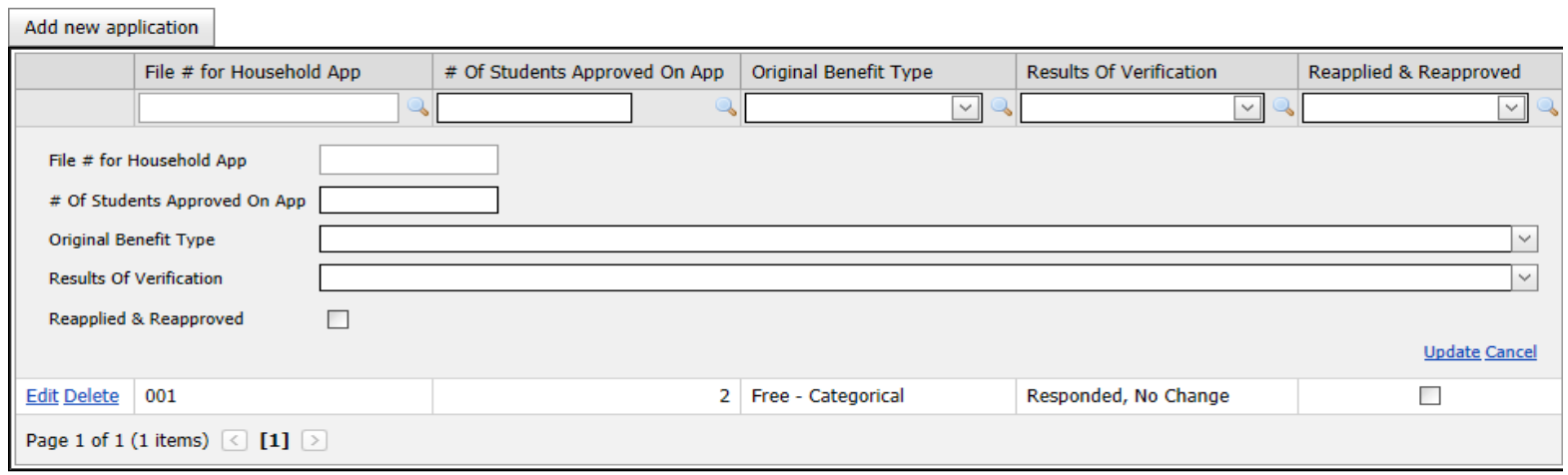
This button must be clicked every time that a new application is entered.

Adding Applications

Enter the File # for Household Application. This is the method the LEA uses to identify the application. Enter information vertically.

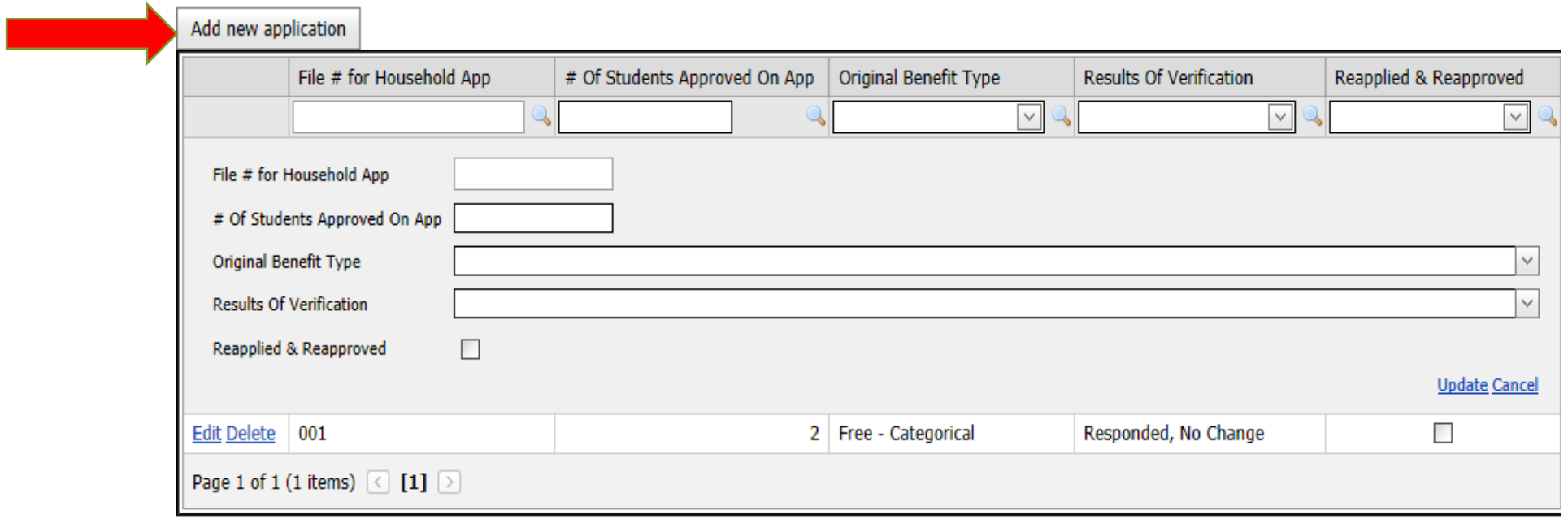
- For example:
  - Numerical
  - Last Name

X X X X X



Adding Applications

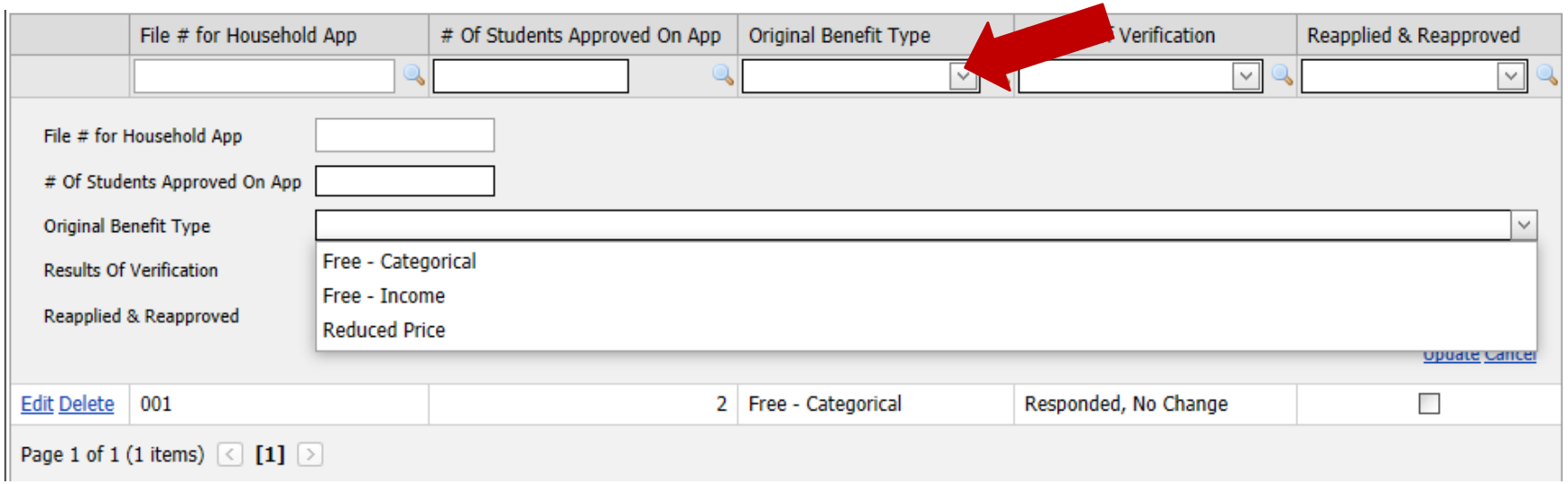
Enter the number of approved students on the application.



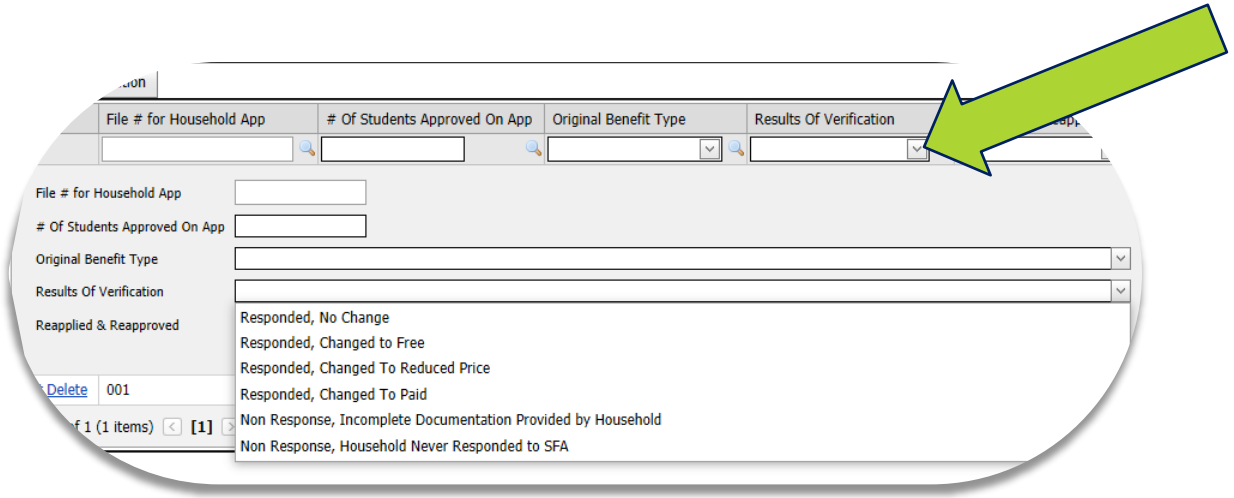
Adding Applications

Select the benefit type prior to the verification process using the drop-down box to select:

- Free-Categorical
- Free Income
- Reduced Price



Adding Applications

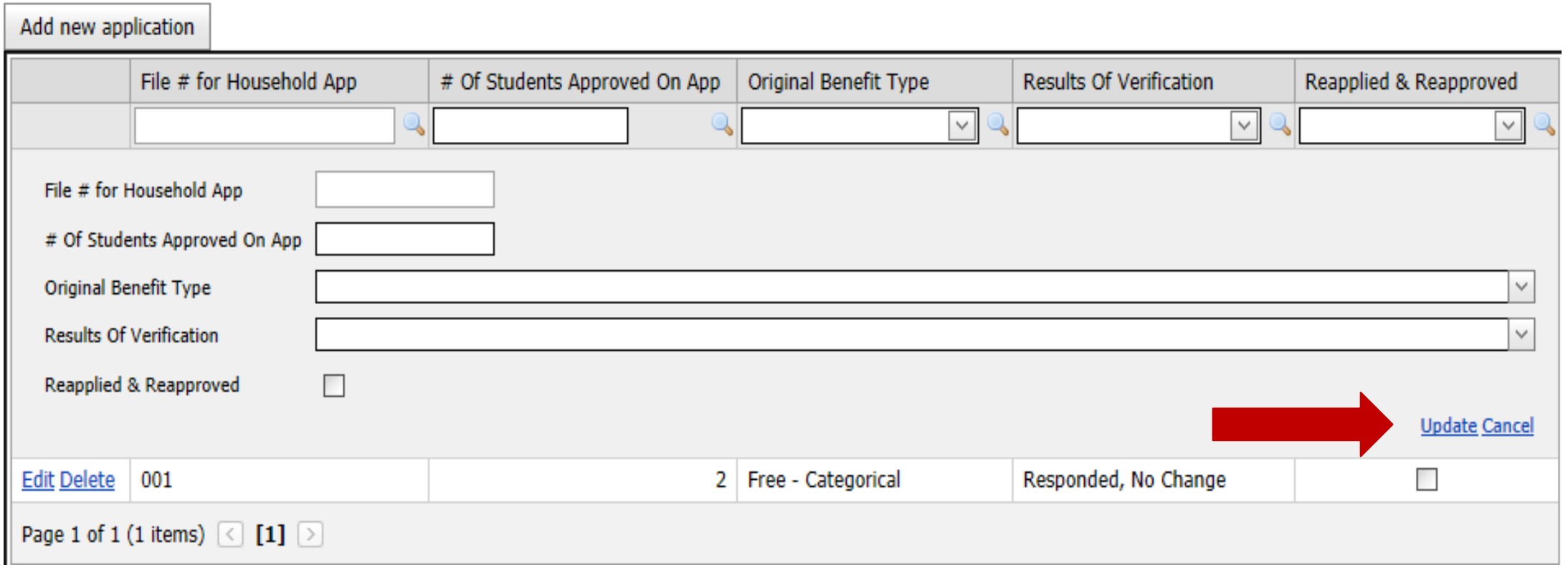


Select the result of verification by using the drop-down box:

- Responded, no change
- Responded, changed to free
- Responded, changed to reduced price
- Responded, changed to paid
- Non-Response, incomplete documentation provided by household
- Non-Response, household never responded to SFA

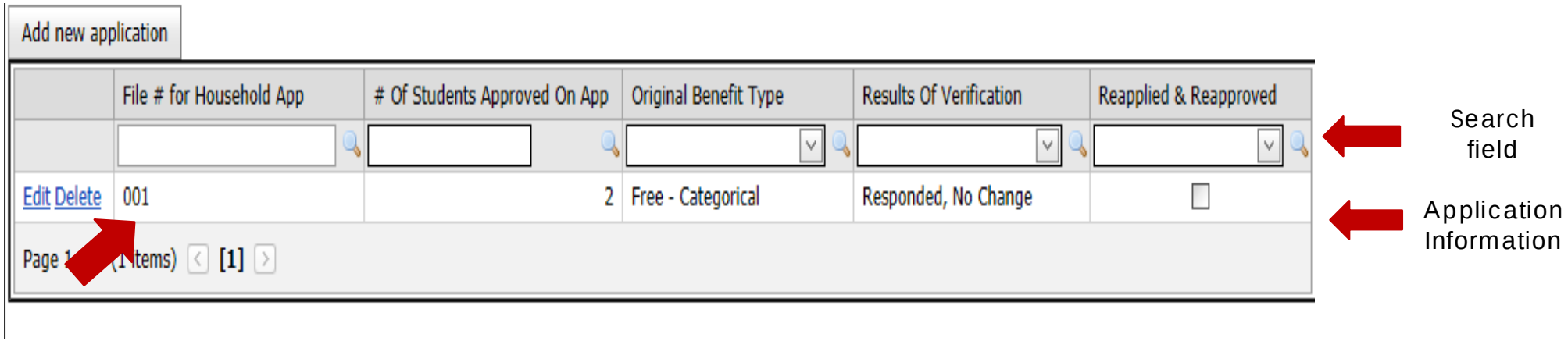
Adding Applications

Click the update button located at the bottom right to enter the application.



Adding Applications

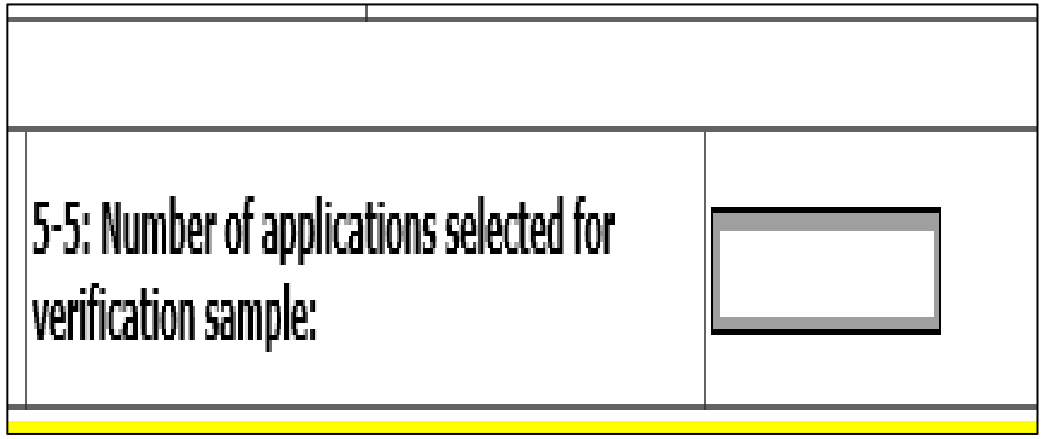
Once updated, the application information is listed below the search fields.



Changes may be made to an application that has already been entered by clicking the *Edit* link beside the application information. The entire application may be deleted by clicking the *Delete* link.

Adding Applications

Click on "Add New Application" to enter all verified applications" until the correct number of applications have been entered (See 5-5).



Checking for Errors

Verification entries may be sorted in the following ways to check for errors:

→ Application ID

→ Number Of Students Approved On Application

↓

Original Benefit Type
- Free – Categorical
- Free – Income
- Reduced Price

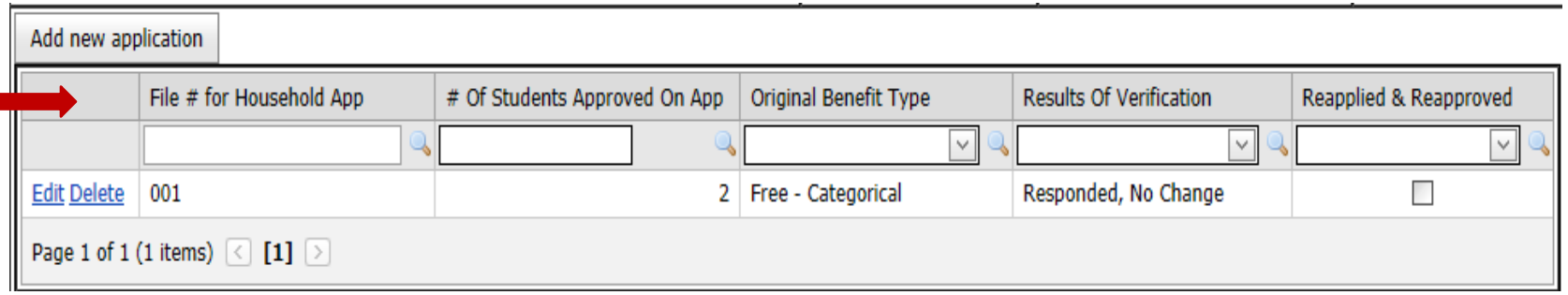
→ Results of Verification
- Responded, no change
- Responded, changed to free
- Responded, changed to reduced price
- Responded, changed to paid
- Non-Response, incomplete documentation provided by household
- Non-Response, household never responded to SFA

→ Reapplied and Reapproved

Methods for Finding Application Information

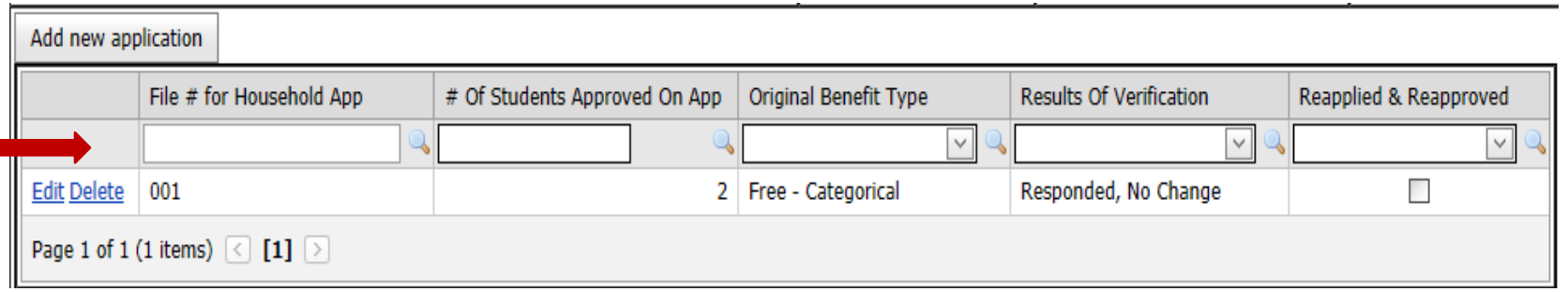
Method One:

Click on Application Data Header



Method Two:

Enter Value in the Search Fields



Results of Verification

5-9: Results of Verification by Original Benifit Type

For each original benifit type (A,B, & C), report the number of applications and students as of November 15th for each result category (1,2,3,& 4).
DO NOT include students and applications already reported in 5-7A or 5-7B.

A. FREE Categorically Eligible Certified as FREE based on documentation (e.g SNAP/TANF/FDPRI case number) on applications			**B. FREE-Income** Certified as FREE based on income/household size application			**C. REDUCED PRICE-Income** Certified as REDUCED PRICE based on income/household size application		
Result Category	a. Applications	b. Students	Result Category	a. Applications	b. Students	Result Category	a. Applications	b. Students
1. Responded, NO CHANGE	0	0	1. Responded, NO CHANGE	0	0	1. Responded, NO CHANGE	0	0
2. Responded, Change to REDUCED PRICE	0	0	2. Responded, Change to REDUCED PRICE	0	0	2. Responded, Change to FREE	0	0
3. Responded, Change to PAID	0	0	3. Responded, Change to PAID	0	0	3. Responded, Change to PAID	0	0
4. NOT Responded, Change to PAID	0	0	4. NOT Responded, Change to PAID	0	0	4. NOT Responded, Change to PAID	0	0

Verification totals will be calculated based on the information entered.

Independent Review on Verification Summary Report

- The following cells IR 1-1 and IR 1-2 will only be visible to districts/facilities required to conduct Independent Review.

IR 1-1: Total number of applications: *Report all applications subject to second review (Independent Review)*		**IR 1-2: Total number of applications: with changed eligibility determinations:** *Report all applications resulting a changed determination due to the second review process*	

IR 1-3: Results of Second Review by Original Benefit Type
For each original benefit type (A,B,& C), report the number of applications for each result category (1,2,& 3) and sub-categories (a,b,c, d)

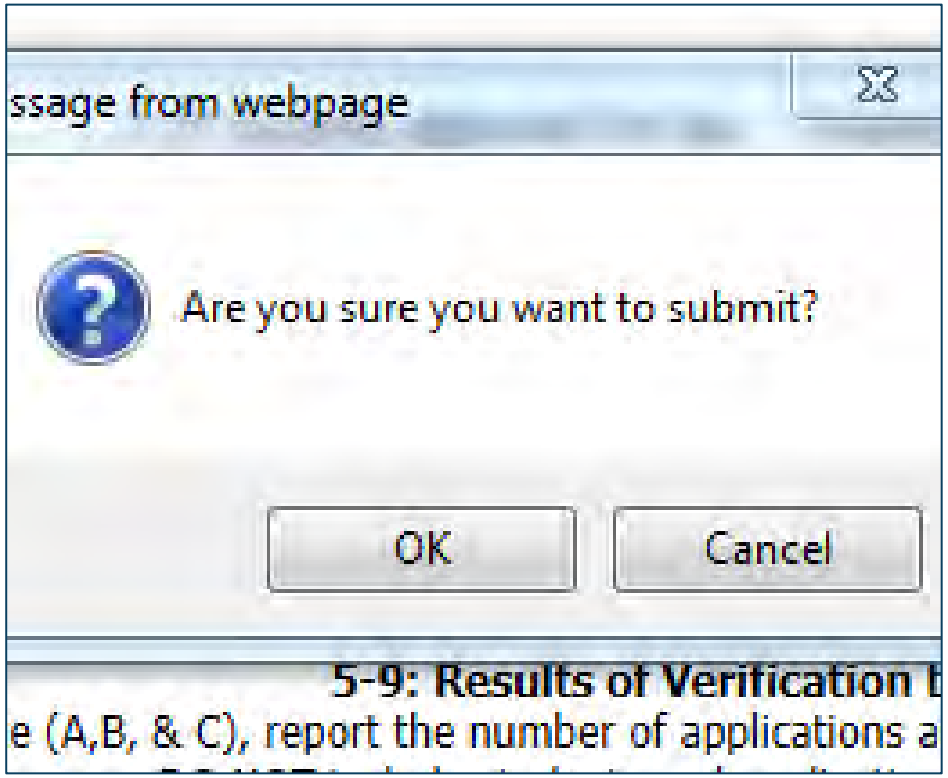
A. FREE Determined as FREE based on application		**B. REDUCED PRICE** Determined as REDUCED PRICE based on application		**C. PAID** Determined as PAID based on application	
1. NO CHANGE:		1. NO CHANGE:		1. NO CHANGE:	
2. Changed to REDUCED PRICED:		2. Changed to FREE:		2. Changed to FREE:	
a. Incomplete application error:		a. Incomplete application error:		a. Incomplete application error:	
b. Categorical Eligibility error:		b. Categorical Eligibility error:		b. Categorical Eligibility error:	
c. Gross Income calculation error:		c. Gross Income calculation error:		c. Gross Income calculation error:	
d. Other error:		d. Other error:		d. Other error:	
3. Changed to PAID:		3. Changed to PAID:		3. Changed to REDUCED PRICE:	
a. Incomplete application error:		a. Incomplete application error:		a. Incomplete application error:	
b. Categorical Eligibility error:				b. Categorical Eligibility error:	
c. Gross Income calculation error:		c. Gross Income calculation error:		c. Gross Income calculation error:	
d. Other error:		d. Other error:		d. Other error:	

Submitting the Verification Summary

- Be sure that you have "Saved" information that you have entered.
- Once all information has been entered, checked for accuracy and saved, click the "Submit" button on the bottom left of the screen.

Submitting the Verification Summary

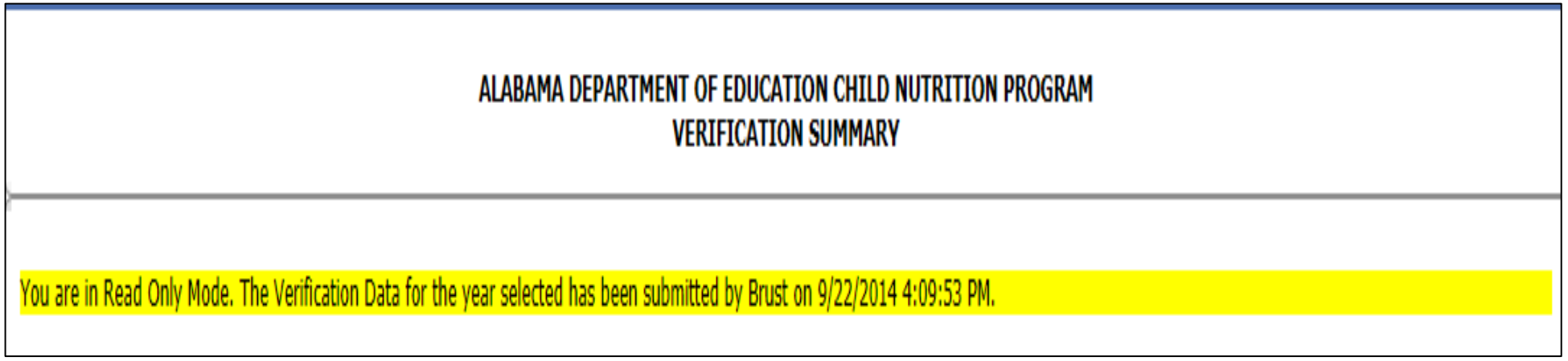
A message from webpage will appear. Click *OK* to finalize submission of the Verification Summary Report.



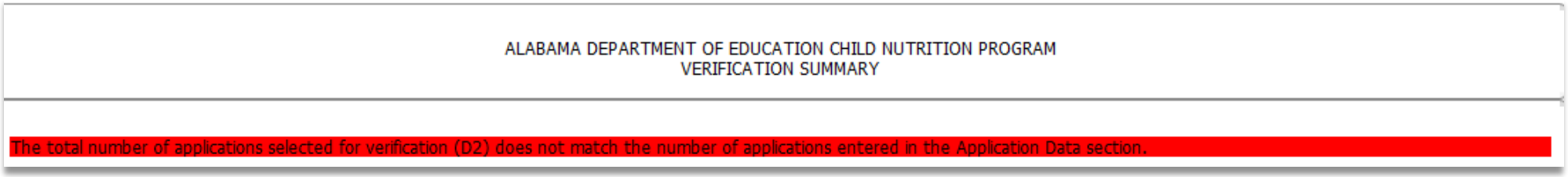
Submitting the Verification Summary

After clicking *OK*, a message will appear that is highlighted yellow.

The message indicates read only mode with the username, date, and time of the successful submission.



Submitting the Verification Summary


ALABAMA DEPARTMENT OF EDUCATION CHILD NUTRITION PROGRAM
VERIFICATION SUMMARY

The total number of applications selected for verification (D2) does not match the number of applications entered in the Application Data section.

If there are errors when the Verification Summary is submitted, an error message will be highlighted in red.

The submission was not successful.

Submitting the Verification Summary

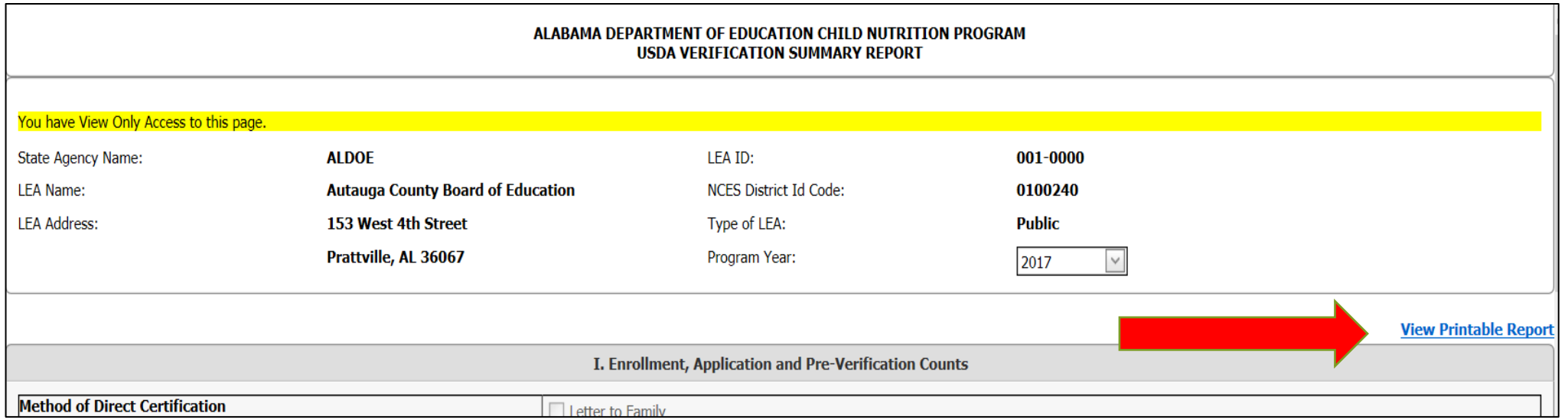
Errors will be identified on the Verification Summary by a red circle with an exclamation point inside.

4-1 Approved as categorically FREE Eligibile: Based on those providing documentation(e.g case number for SNAP, TANF, FDPIR on an applicaton)		
4-2: Approved as FREE Eligible: Based on household size and income information		

Correct the errors and click the *Submit* button again.

After Submitting the Verification Summary Report

The Verification Summary Report can be printed by clicking on "File", then "Print" on the upper right corner of your screen.



ALABAMA DEPARTMENT OF EDUCATION CHILD NUTRITION PROGRAM
USDA VERIFICATION SUMMARY REPORT

You have View Only Access to this page.

State Agency Name:	**ALDOE**	LEA ID:	**001-0000**
LEA Name:	**Autauga County Board of Education**	NCES District Id Code:	**0100240**
LEA Address:	**153 West 4th Street**	Type of LEA:	**Public**
	Prattville, AL 36067	Program Year:	2017

View Printable Report

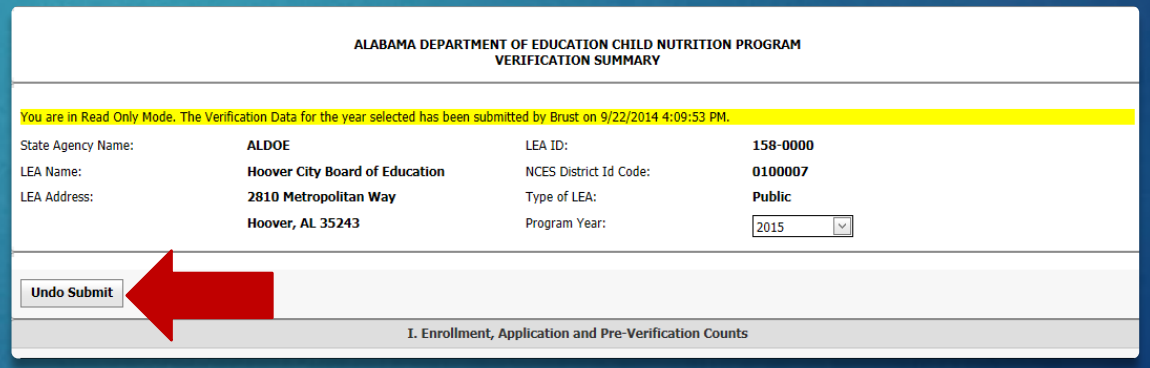
I. Enrollment, Application and Pre-Verification Counts

Method of Direct Certification	☐ Letter to Family

After Submitting the Verification Summary Report

The Verification Summary Report may be edited after it has been submitted until January 20.

Click the *Undo Submit* button located in the top left corner of the Verification Summary Report below the year selection.



Questions?

Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

fax:
(833) 256-1665 or (202) 690-7442; or

email:
program.intake@usda.gov