Licensed For Profit Child Care Institutions
Application instructions to participate in the
Child and Adult Care Food Program (CACFP)

Please open and print the forms listed for participation in the Child and Adult Care Food Program. Please read instructions on the application to assist with your completion of the application materials. Please be sure all questions are answered and that **ALL** forms have been **signed** and **dated**. Incomplete applications will be returned and cause delays to the start date for participation in the Program.

The e-mail or fax number you provide will be the preferred method of correspondence for all communications between Missouri Department of Health and Senior Services-Bureau of Community Food Nutrition Assistance (DHSS-BCFNA) and your organization. Please monitor these methods of communication frequently. **Please notify DHSS-BCFNA if the e-mail address or fax number changes.**

Print and complete the following forms (keep a copy of all forms submitted):

Application and Management Plan, 6 pages (CACFP-1)
Application/Center Information, 5 pages (CACFP-2)
Budget (CACFP-209)
Menu Forms (CACFP-210) **(submit two (2) weeks of menus for each meal served at facility)**
Network User Access Request form (MO 580-1854E)
Vendor Input/ACH-EFT App (MO-300-1489) **(direct deposit required)**
Copy of enrollment roster for same month with participants marked as FSD (state funded) or eligible for free or reduced price meals
Business Management Assessment Application Instructions
Business Management Assessment Application Form
Exhibit B – Duns Number

Centers charging a separate fee for meals must print and complete the following form:

Policy Statement for Pricing Centers, 4 pages

Submit as part of the application:

Copy of current child care license
Copy of Food Service Management Company or School Food Authority contract **(catered food service only)**
Copy of Child Care Facility Overlap Approval (DC 16) **(if applicable)**
Copy of letter for shift care **(if applicable)**
Copy of current FSD Child Care Provider contract
Signed Memorandum of Understanding from the E-Verify federal work authorization program

Read and use the following information/resources:

Food Chart Child, Food Chart Infant, Four Food Components and Creditable Foods Guide **(Needed to complete menus)**
CACFP Child Care Income Eligibility Guidelines
CACFP Child Care Recordkeeping Requirements

The *Income Eligibility Guidance for the Child and Adult Care Food Program – Child Care Centers* (IEF booklet) provides directions on how to categorize enrolled participants on the application form. Copy the Parent letter (page 4) and the Income Eligibility form (page 9) and send home to participant's parent or guardian to complete. These Income Eligibility forms must be completed and on file for participants to be claimed in the free or reduced price category before you submit your claim. Estimates of the number in each category can be made for each category at the time of application.

The *Recordkeeping Essentials* booklet will help you with the program documentation requirements. You may want to bookmark or print this resource for frequent reference.

Sign-up for orientation class ***(Need to attend before application can be approved).***

As part of the application process, attendance at Program Orientation Training is required. To schedule training go to Program orientation training and sign up for this training in one of our district offices. Attendance at this training is ***REQUIRED*** before your application can be approved. Please take copies of the IEF booklet, the *Recordkeeping Essentials* booklet, and 2 weeks of menus with you to this training.

You will be sent a contract and Scope of Work once your application is approved. Please be sure to read, complete the affidavit and sign your contract and return all to the office as quickly as possible. No payment can be made to your institution until a fully signed and executed contract is on file in our office.

Please submit the **original, completed, signed, and dated** application packet to the following address or fax number:

Missouri Department of Health and Senior Services
Community Food and Nutrition Assistance
930 Wildwood (if shipped by UPS or FEDEX)
P.O. Box 570 (for U.S. Mail)
Jefferson City, MO 65102
Fax: 573-526-3679

Be sure to keep a copy of the application and all attachments for your records.

Thank you for your interest in the Child and Adult Care Food Program! If you have any questions about the application forms or the approval process, please call the toll-free number 800-733-6251.