

Department of Agriculture, Food and Nutrition Service
School Food Authority (SFA) Verification Collection Report

State agencies must report the information on this form ANNUALLY for each SFA with schools operating the National School Lunch Program (NSLP) and/or the School Breakfast Program (SBP).

All SFAs, including SFAs with all schools exempt from verification requirements, must complete applicable sections.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. The valid OMB number for this collection is 0584-0026. The time required to complete this information collection is 45 minutes per response, including the time to review instructions, search existing data resources, gather the data needed and complete and review the information collection.

State Agency Name:	SFA ID#:	Type of SFA: <input type="checkbox"/> Public <input type="checkbox"/> Nonprofit/Private	School Year: From: To:
SFA Name:		SFA City:	SFA Zip code:

Section 1	Total Schools, Residential Child Care Institutions (RCCIs) and Enrolled Students	**All SFAs must report Section 1**		A. Number of Schools OR Institutions	B. Number of Students
		1-1: Total schools (Do not include RCCIs):		1-1 A	1-1 B
		1-2: Total RCCIs (Do not include schools counted in 1-1):		1-2 A	1-2 B
		1-2a: RCCIs with day students (Report ONLY day students in 1-2aB):		1-2a A	1-2a B
		1-2b: RCCIs with NO day students:		1-2b A	1-2b B

Section 2	SFAs with schools operating alternate provisions	**ONLY SFAs with alternate provisions must report Section 2**		A. Number of Schools AND Institutions	B. Number of Students
		2-1: Operating Provision 2/3 in a BASE year for NSLP and SBP:		2-1 A	2-1 B
		2-2: Operating Provision 2/3 in a NON BASE year for NSLP and SBP:		2-2 A	2-2 B
		2-2a: Provision 2/3 students reported as FREE in a NON BASE year:			2-2a B
		2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:			2-2b B
		2-3: Operating the Community Eligibility Option:		2-3 A	2-3 B
		2-4: Operating other alternatives for NSLP and SBP:		2-4 A	2-4 B
2-5: Operating an alternate provision(s) for only SBP or only NSLP:		2-5 A	2-5 B		

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 FREE Students
		3-1: <input type="checkbox"/> 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.		3-2
		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), or Medicaid (if applicable); 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.		3-3
3-4: Students certified categorically FREE eligible through SNAP letter method: Include students certified for free meals through the family providing a letter from the SNAP agency.		3-4		

Section 4	Students approved as FREE or REDUCED PRICE eligible through a household application	**ALL SFAs collecting applications must report Section 4**		A. Number of Applications	B. Number of Students
		4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP, TANF, FDPIR on an application)		4-1 A	4-1 B
		4-2: Approved as FREE eligible: Based on household size and income information		4-2 A	4-2 B
		4-3: Approved as REDUCED PRICE eligible: Based on household size and income information		4-3 A	4-3 B

T-1: Total FREE Eligible Students Reported:	T-1	T-2: Total REDUCED PRICE Eligible Students Reported:	T-2
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Section 5	**ALL SFAs must report Section 5 or check box 5-1 if applicable** 5-1: <input type="checkbox"/> Check the box if ALL schools and/or RCCIs are exempt from verification (see instructions for list of exemptions). If 5-1 is checked, no further reporting in Section 5 is required.																																															
	5-2: Was verification performed and completed? <input type="checkbox"/> Yes, completed by November 15th <input type="checkbox"/> Yes, completed after November 15th <input type="checkbox"/> No, verification was NOT performed or the process was not completed.				5-3: Type of Verification process used: 1. <input type="checkbox"/> Standard (Lesser of 3% or 3,000 error-prone) 2. <input type="checkbox"/> Alternate one (Lesser of 3% or 3,000 selected randomly) 3. <input type="checkbox"/> Alternate two (Lesser of 1% or 1,000 error prone applications PLUS lesser of one-half of one percent or 500 applications with SNAP/TANF/FDPIR case numbers)																																											
	If 1 or 3 is checked in 5-3, report 5-4. If 2 is checked in 5-3, enter "N/A" in 5-4.		5-4: Total ERROR PRONE applications: <i>Report all applications as of October 1st considered error prone</i>		5-4		5-5: Number of applications selected for verification sample:		5-5																																							
	ALL SFAs must report 5-7 or check box 5-6 if applicable 5-6: <input type="checkbox"/> Check the box if direct verification was not conducted in the SFA, (i.e. not one of the schools and/or RCCIs in the SFA performed direct verification). If 5-6 is checked, skip 5-7.								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:		5-7A		5-7B																																						
	5-8: Results of Verification by Original Benefit Type For each original benefit 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 <i>Certified as FREE based on SNAP/TANF/FDPIR documentation (e.g. case number) on application</i>				B. FREE-Income <i>Certified as FREE based on income/household size application</i>				C. REDUCED PRICE-Income <i>Certified as REDUCED PRICE based on income/household size application</i>																																							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Result Category</th> <th style="width: 20%;">a. Applications</th> <th style="width: 20%;">b. Students</th> </tr> <tr> <td>1. Responded, NO CHANGE:</td> <td style="text-align: center;">5-8A.1a</td> <td style="text-align: center;">5-8A.1b</td> </tr> <tr> <td>2. Responded, Changed to REDUCED PRICE:</td> <td style="text-align: center;">5-8A.2a</td> <td style="text-align: center;">5-8A.2b</td> </tr> <tr> <td>3. Responded, Changed to PAID:</td> <td style="text-align: center;">5-8A.3a</td> <td style="text-align: center;">5-8A.3b</td> </tr> <tr> <td>4. NOT Responded, Changed to PAID:</td> <td style="text-align: center;">5-8A.4a</td> <td style="text-align: center;">5-8A.4b</td> </tr> </table>	Result Category	a. Applications	b. Students	1. Responded, NO CHANGE:	5-8A.1a	5-8A.1b	2. Responded, Changed to REDUCED PRICE:	5-8A.2a	5-8A.2b	3. Responded, Changed to PAID:	5-8A.3a	5-8A.3b	4. NOT Responded, Changed to PAID:	5-8A.4a	5-8A.4b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Result Category</th> <th style="width: 20%;">a. Applications</th> <th style="width: 20%;">b. Students</th> </tr> <tr> <td>1. Responded, NO CHANGE:</td> <td style="text-align: center;">5-8B.1a</td> <td style="text-align: center;">5-8B.1b</td> </tr> <tr> <td>2. Responded, Changed to REDUCED PRICE:</td> <td style="text-align: center;">5-8B.2a</td> <td style="text-align: center;">5-8B.2b</td> </tr> <tr> <td>3. Responded, Changed to PAID:</td> <td style="text-align: center;">5-8B.3a</td> <td style="text-align: center;">5-8B.3b</td> </tr> <tr> <td>4. NOT Responded, Changed to PAID:</td> <td style="text-align: center;">5-8B.4a</td> <td style="text-align: center;">5-8B.4b</td> </tr> </table>	Result Category	a. Applications	b. Students	1. Responded, NO CHANGE:	5-8B.1a	5-8B.1b	2. Responded, Changed to REDUCED PRICE:	5-8B.2a	5-8B.2b	3. Responded, Changed to PAID:	5-8B.3a	5-8B.3b	4. NOT Responded, Changed to PAID:	5-8B.4a	5-8B.4b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Result Category</th> <th style="width: 20%;">a. Applications</th> <th style="width: 20%;">b. Students</th> </tr> <tr> <td>1. Responded, NO CHANGE:</td> <td style="text-align: center;">5-8C.1a</td> <td style="text-align: center;">5-8C.1b</td> </tr> <tr> <td>2. Responded, Changed to FREE:</td> <td style="text-align: center;">5-8C.2a</td> <td style="text-align: center;">5-8C.2b</td> </tr> <tr> <td>3. Responded, Changed to PAID:</td> <td style="text-align: center;">5-8C.3a</td> <td style="text-align: center;">5-8C.3b</td> </tr> <tr> <td>4. NOT Responded, Changed to PAID:</td> <td style="text-align: center;">5-8C.4a</td> <td style="text-align: center;">5-8C.4b</td> </tr> </table>	Result Category	a. Applications	b. Students	1. Responded, NO CHANGE:	5-8C.1a	5-8C.1b	2. Responded, Changed to FREE:	5-8C.2a	5-8C.2b	3. Responded, Changed to PAID:	5-8C.3a	5-8C.3b	4. NOT Responded, Changed to PAID:	5-8C.4a	5-8C.4b
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4. NOT Responded, Changed to PAID:	5-8C.4a	5-8C.4b																																														
VC-1: Total questionable applications verified for cause (Enter "N/A" if not applicable): <i>Report the number of applications as of November 15th verified for cause <u>in addition</u> to the verification requirement.</i>								VC-1																																								

Additional Instructions for Reporting the FNS-742

For additional guidance on verification requirements and procedures, refer to the Eligibility Manual (<http://www.fns.usda.gov/cnd/guidance/EliMan.pdf>).

Enter the State agency name, SFA name, SFA ID, SFA city, SFA zip code for each SFA with schools and/or RCCIs operating the NSLP and/or SBP.

Select if the SFA overall is a public or a private/nonprofit entity and enter the school year for which the report is completed. Include schools and/or RCCIs and the enrolled students **only once** if operating both NSLP and SBP.

Section 1

All SFAs with schools or RCCIs operating the NSLP and/or SBP must complete this section regardless if all schools are exempt from verification. Report schools or institutions operating the NSLP and/or SBP and students with access to the NSLP and/or SBP as of the **last operating day in October**.

1-1A & B: TOTAL number of schools (not including RCCIs) operating the NSLP and/or SBP and the TOTAL number of enrolled students with access to the NSLP and/or SBP.

1-2A & B: TOTAL number of RCCIs operating the NSLP and/or SBP and the TOTAL number of enrolled students with access to the NSLP and/or SBP in RCCIs.

1-2aA & 1-2aB: Of the RCCIs reported in 1-2A; enter the number of RCCIs with DAY students and ONLY the DAY students with access to the NSLP and/or SBP in RCCIs (**day students are those students NOT institutionalized and eligibility is determined individually by application or direct certification as applicable**).

1-2bA & 1-2bB: Of the RCCIs reported in 1-2A; enter the number of RCCIs with NO day students and the TOTAL number of institutionalized students.

NOTE: The sum of the students reported in 1-2aB and 1-2bB will NOT equal the total in 1-2B.

Section 2

All SFAs with some or all schools and/or RCCIs operating under an alternative provision must complete this section. For RCCIs operating an alternate provision, include both day and residential students. Report students with access to the NSLP and/or SBP as of the **last operating day in October**. 2-1 through 2-4 should be reported only if the school operates alternate provisions for BOTH programs resulting in no collection of applications for the school. Schools operating Provision 2/3 for only one program and collecting household applications for the other program should report applicable provision data in 2-5.

2-1A & B: BASE year is when certification procedures are conducted.

2-2A & B: NON BASE year is when no certification procedures are conducted.

2-2aB, 2-2bB: Multiply the most recent base year FREE percentage by the enrollment reported in 2-2B to determine 2-2aB. Multiply the base year REDUCED PRICE percentage by the enrollment reported in 2-2B to determine 2-2bB.

2-3A & B: Number of schools operating the Community Eligibility Option and the number of enrolled students in the schools with access to the NSLP and/or SBP.

2-4A & B: Other alternatives include Provision 1 and universal meal service through census data or socioeconomic surveys.

2-5A & B: Enter the number of schools and/or RCCIs and students enrolled operating an alternate provision for **ONLY SBP** or **ONLY NSLP**. Include schools/RCCIs operating in both a base year and non base year.

Section 3

All SFAs must complete this section. If all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP, then check box 3-1. Direct certification is the process by which the student is certified eligible based on documentation received directly from the applicable program (e.g. SNAP or TANF agency). This process eliminates the need for the household to submit an application. Report students approved FREE eligible as of the **last operating day in October**.

3-2B: Include students directly certified with SNAP. If a student is directly certified with SNAP as well as with another program (e.g. TANF/eligible homeless), include the student in this SNAP count (3-2B). Also include in this count any student in the SFA deemed eligible based on extended categorical eligibility via an eligible student in the primary household who has been directly certified with SNAP. DO NOT include SNAP letter method certifications in this SNAP count, report these in 3-4B below. (SNAP letter method certifications are when the family submits a letter from the SNAP agency to document receipt of SNAP benefits. This is no longer considered to be direct certification.)

3-3B: Include students directly certified through programs other than SNAP. Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household directly certified with TANF or FDPIR. DO NOT include SNAP students already reported in 3-2 or to be reported in 3-4 as certified categorically through SNAP letter method.

3-4B: Include ONLY students certified as categorically FREE eligible based on a letter submitted by family from the SNAP agency. Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household certified as FREE categorically eligible with the letter method with SNAP.

Section 4

All SFAs with schools and/or RCCIs collecting individual household applications must report this section, including schools and/or RCCIs in a Provision 2/3 base year. Report number of **applications (A)** approved as of **October 1st**. Report number of **students (B)** as of the **last operating day in October**.

4-1A & B: Number of **applications** approved FREE eligible based on documentation submitted on an application (i.e. case number for SNAP, TANF, or FDPIR on an application) on file as of **October 1st** and the number of **students as of the last operating day in October** approved FREE eligible based on documentation submitted on an application (i.e. case number for SNAP, TANF, or FDPIR on an application). *Include students in the SFA deemed eligible due to extended categorical eligibility via an eligible student in the primary household categorically FREE eligible with SNAP, TANF, or FDPIR.*

4-2A & B: Number of **applications** approved FREE eligible based on income information submitted by the household on file as of **October 1st** and the number of **students as of the last operating day in October** approved FREE eligible based on income information submitted by the household.

4-3A & B: Number of **applications** approved REDUCED PRICE eligible based on income information submitted by the household on file as of **October 1st** and the number of **students as of last operating day in October** approved REDUCED PRICE eligible based on income information submitted by the household.

T-1: Enter the total number of students reported as FREE eligible.
(3-2B) + (3-3B) + (3-4B) + (4-1B) + (4-2B) + (2-2aB, if applicable)

T-2: Enter the total number of students reported as REDUCED PRICE eligible.
(4-3B) + (2-2bB, if applicable)

If **ALL** schools and/or RCCIs in the SFA are exempt from verification activities, check box **5-1** and no further reporting is required in Section 5. Verification activities are NOT required for:

- schools/RCCIs in which **all** children have been certified under direct certification procedures including children documented as eligible foster, migrant, runaway or homeless children;
- RCCIs which do not have day students;
- schools electing the Community Eligibility Option;
- schools/RCCIs in which FNS has approved universal meal service through census data or using socioeconomic surveys; e.g., special cash assistance claims based on economic statistics regarding per capita income (Puerto Rico and the Virgin Islands);
- schools participating only in the Special Milk Program;
- schools in which all children are served with no separate charge for food service and no special cash assistance is claimed, (i.e., non-pricing programs claiming only the paid rate of reimbursement);
- all schools are Provision 2/3 schools in a non base year;
- schools which do not have any free or reduced price eligible students;
- other FNS determined exemptions on a case-by-case basis.

5-2: Indicate whether verification was performed and completed by the deadline of November 15th. If verification was completed after the deadline, report the remainder of Section 5 as applicable.

5-3: If verification was completed, check the type of verification process used to comply with the requirements of 7 CFR 245.6a. Please note the qualification requirements in 7 CFR 245.6a(d) must be met to use the two alternate sample sizes.

- **Standard:** Verify 3% or 3,000 of approved applications, whichever is less, selected from error-prone applications on file as of **October 1st**. If there are not enough error-prone applications, LEAs must select at random additional applications to complete sample size.
- **Alternate one:** Verify 3% or 3,000, whichever is less, of all randomly selected approved applications on file as of **October 1st**.
- **Alternate two:** Verify the lesser of 1% or 1,000 approved applications as of **October 1st** selected from error prone applications PLUS the lesser of one-half of one percent or 500 applications approved as of **October 1st** that provided a case number in lieu of income.

5-4: Error-prone applications are household applications approved as of **October 1st** indicating monthly income within \$100 of the monthly limit or annual income within \$1,200 of the annual limit of the applicable income eligibility guidelines.

5-5: Enter the total number of applications initially selected for the verification process as indicated in 5-3.

5-6: Check if direct verification was not conducted in the SFA (not one school in the SFA conducted direct verification). Direct verification is using records from public agencies to verify income and/or program participation.

5-7A & B: Only report applications and students if FREE and/or REDUCED PRICE eligibility is confirmed through direct verification. Report applications and students not directly verified in the appropriate category in 5-8.

5-8: For the purposes of this report verification is complete:

- for households whose eligibility does not change as of the date of the confirmation of eligibility by a reviewing official;
- for households which do not appeal a change in eligibility as of the first operating day following the last date for filing an appeal in response to a notice of change in eligibility;
- for households which appeal a change in eligibility as of the first operating day following a decision by the hearing official.

Responded: The household provided sufficient documentation. This includes verbal or written notification that the household declines benefits.

NOT Responded: The household did not provide sufficient documentation or the household did not provide a response.

A1, B1, & C1: Number of applications with no change and the number of students on these applications.

A2 & B2: Number of applications changed to REDUCED PRICE based on sufficient documentation provided by the household and the number of students on the applications.

C2: Number of applications changed to FREE based on sufficient documentation provided by the household and the number of students on the applications.

A3, B3, & C3: Number of applications for which the eligibility was changed to PAID based on sufficient documentation by the household and the number of students on the applications.

A4, B4, & C4: Number of applications for which the eligibility was changed to PAID because documentation necessary to complete the verification process was NOT provided and the number of students on the applications.

The number of applications reported in 5-8 should include both the results of verification from verification process and the results from any applications verified for cause reported in VC-1.

VC-1: If applicable in at least one school and/or RCCI, report all applications verified for cause outside of the verification process (7 CFR 245.6a) as of November 15th. Applications verified for cause are NOT considered part of the required sample size.

Include the results of verification for cause by original benefit type in the appropriate category in 5-8.