

SFA/School District: _____

LEA #: _____

Child Nutrition Contact Information Page

(Must be attached to Policy Statement)

Superintendent: _____

Personal Emergency Number* _____

District Child Nutrition Director: _____

Personal Emergency Number* _____

* For use in case of emergency food recall

<p>Determining Official(s)* – How many Determining Officials approve meal applications in the district? _____</p> <p>Name _____</p> <p>Name _____</p> <p>Name _____</p> <p>* List additional on back of page</p>	<p>Direct Certification Contact – Responsible to receive email notifications regarding Direct Certification and ensuring the students on the Direct Certification list receive free meal benefits</p> <p>Name _____</p> <p>Phone _____</p> <p>Email _____</p>
<p>Confirming Official – CANNOT be the same person as the Determining Official and/or Hearing Official</p> <p>Name _____</p> <p>Name _____</p>	<p>Authorized Purchasing Agent – Responsible as the Authorized Purchasing Agent(s) for the Non-Profit Child Nutrition Account</p> <p>Name _____</p> <p>Position _____</p> <p>Name _____</p> <p>Position _____</p>
<p style="text-align: center;">Verifying Official</p> <p>Name _____</p> <p>Name _____</p> <p>Location of approved applications during the school year (Superintendent's office, CN Directors office, etc.) _____</p>	<p>District eSchool Enrollment Account Manager – Responsible to ensure that student meal eligibility has been changed to "03 or paid" status at end of school year roll over)</p> <p>Name _____</p> <p>Phone _____</p> <p>Email _____</p>
<p style="text-align: center;">Hearing Official – CANNOT be the same person as the Determining Official</p> <p>Name _____</p> <p>Position _____</p>	<p style="text-align: center;">District Technology Coordinator –CANNOT be CN Director</p> <p>Name _____</p> <p>Phone _____</p> <p>Email _____</p>
<p>On-Site Reviewer – Responsible for completion of On-Site Review at all serving sites prior to February 1 each school year</p> <p>Name _____</p> <p>Position _____</p>	<p style="text-align: center;">District Foster Care Liaison</p> <p>Name _____</p>
<p style="text-align: center;">CN APSCN Financial Reporting</p> <p>Name _____</p>	<p style="text-align: center;">District Homeless Liaison</p> <p>Name _____</p>
<p style="text-align: center;">APSCN Student Data</p> <p>Name _____</p>	<p style="text-align: center;">District Migrant Coordinator</p> <p>Name _____</p>