

City of Atlanta
2016 Summer Food Service Program
818 Pollard Boulevard, Suite 301
Atlanta, GA 30315

Please read this carefully. It will help us determine your site's eligibility for the 2016 Summer Food Service Program.

Your site is eligible to receive free meals based on two (2) methods:

1. The **PUBLIC SCHOOL** near your site had 50% or more of its children on free or reduced priced meals during the school year. Your site desires to feed the children in the community during the designated time for meal service. Your site will be designated as an **OPEN SITE**.

2. The **PUBLIC SCHOOL** near your site had 50% or more of its children on free or reduced priced meals during the school year. Your site desires to feed the children only enrolled in your program during the designated time for meal service. Your site will be designated as a **CLOSED ENROLLED SITE**.

Choose One

I _____, Site Supervisor of _____
(Please Print) (Please Print)

would like to qualify as an **OPEN SITE** for the 2016 Summer Food Service Program. We will feed all needy children in our community who attend our meal service.

I _____, Site Supervisor of _____
(Please Print) (Please Print)

would like to qualify as a **CLOSED ENROLLED SITE** for the 2016 Summer Food Service Program. We will only feed the children registered in our site who attend our meal service.

Accountability Statement (Mandatory Signature Required)

I will abide by all Summer Food Service Program (SFSP) guidelines. If I fail to abide by the prescribed guidelines, I will be accountable for all expenses incurred due to any financial negligence. This is inclusive of failure to distribute meals accordingly, failure to document all meals, failure to serve to children under the age of 18, unless designated under SFSP mental/physical disability guidelines and failure to abide by all training guidelines, which cause financial repercussions to the City of Atlanta.

Note: The City of Atlanta will enforce repayment, at cost, if the State (DECAL) or Federal Monitoring Agency (USDA) disallows any meals due to any failure to meet SFSP guidelines.

I agree to the specified terms.

(Please Print)

(Signature)