

## State of New Jersey

DEPARTMENT OF AGRICULTURE 33 West State Street 4<sup>th</sup> Floor PO Box 334 TRENTON NJ 08625-0334

DOUGLAS H. FISHER Secretary

## CHILD AND ADULT CARE FOOD PROGRAM 2015 MEAL BENEFIT FORMS

USDA requires a current and complete eligibility application for all participants determined in the free or reduced categories. Therefore, agencies must annually re-collect and ensure that eligibility documentation is current, complete and properly determined in order to receive correct reimbursement rates and proper payment. Current means that the eligibility application is signed and dated by parents/guardians within the last 12 months. The date and signature must be completed to verify that the forms on file are current. Incomplete. outdated and missing applications must be classified in the paid category, resulting in the lowest rate of reimbursement paid to your agency for those applications.

Because the eligibility information is the basis for determining reimbursement rates, it is important that you establish step-by-step procedures for collecting, reviewing, determining and maintaining household size and gross income documentation for each participant claimed as eligible for the free or reduced rate of reimbursement. It is your responsibility to ensure that this information is complete, and that the application is properly determined in order to receive the correct reimbursement rate for each meal and proper payment. Failure to do so could result in incorrect rates of reimbursement and the assessment of an overclaim against your sponsorship.

For your convenience, we have also included the Spanish translation of the following Meal Benefit Forms:

- Meal Benefit Form Instructions
- Letter to Households
- Meal Benefit Form  $\triangleright$
- Income Eligibility Guidelines

In addition to the hard copy of the Spanish translation, Meal Benefit Forms are available in 18 other languages online and you may view and/or print these forms by visiting the following web site:

## http://www.fns.usda.gov/cnd/care/Benefit Forms/Translations.htm

Note that your agency must serve the same meals at no separate charge to all participants enrolled in the Child and Adult Care Food Program regardless of race, color, national origin, sex, age, disability, gender identity, religion, reprisal, and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the department, and that there is no discrimination in the meal service, admissions policy or use of any Child and Adult Care Food Program facility.

If you have any questions regarding this distribution, you may call the Child and Adult Care Food Program office at (609) 984-1250.

Note: CACFP records unavailable on-site at the time of the visit will result in an overclaim to your sponsorship for any meals for which proper documentation is not available.

CHRIS CHRISTIE Governor KIM GUADAGNO

Lt. Governor