

United States Department of Agriculture

USDA Nondiscrimination Statement (Continued)

For all other FNS nutrition assistance programs, State or local agencies, and their subrecipients, must post the following Nondiscrimination Statement:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: How to File a Complaint, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

The Emergency Food Assistance Program (TEFAP) – Written Notice of Beneficiary Rights

Name of Organization:

Contact Information for Program Staff: Name

Phone Number

Email Address

Because TEFAP is supported in whole or in part by financial assistance from the Federal Government, we are required to let you know that—

- We may not discriminate against you on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice;
- We may not require you to attend or participate in any explicitly religious activities that are offered by us, and any participation by you in these activities must be purely voluntary;
- We must separate in time or location any privately funded explicitly religious activities from activities supported with USDA direct assistance;
- If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available; and
- You may report violations of these protections (including denials of services or benefits) by an organization to the State agency (<http://www.fns.usda.gov/fdd/food-distribution-contacts>). The State agency will respond to the complaint and report the alleged violations to their respective USDA FNS Regional Office (<http://www.fns.usda.gov/fns-regional-offices>).

We must provide you with this written notice before you enroll in TEFAP or receive services from TEFAP, as required by 7 CFR part 16.

Alternate Service Location(s) or State Agency Contact Information:

Name of Organization and Contact Person

Phone Number

Email Address

**The Emergency Food Assistance Program (TEFAP) and
Commodity Supplemental Food Program (CSFP) –
Beneficiary Referral Request**

Name of Organization:

Contact information for program staff (name, phone number, and email address, if appropriate):

If you object to receiving services from us based on the religious character of our organization, please complete this form and return it to the program contact identified above. Your use of this form is voluntary.

If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available.

Please check if you want to be referred to another service provider.

Please provide the following information:

Your name:

Best way to reach you (phone/address/email):

FOR STAFF USE ONLY

1. Date of objection: ___/___/___

2. Referral (check one):

- Individual was referred to (name of alternate provider and contact information):
- Individual was given State agency-provided referral information (i.e. a website, hotline, or list of other service providers funded by the State agency)
- Individual left without a referral
- No alternate service provider is available—summarize below what efforts you made to identify an alternate provider (including reaching out to State agency or local or eligible recipient agency):

CHILD NUTRITION PROGRAMS AUDIT CERTIFICATION

SPONSOR: _____ AGREE #: _____

SPONSOR TYPE: Non-Profit _____ Governmental _____ Military _____ BOE _____ Title XX _____
Other _____ Part of State Agency? _____

Agency fiscal period: _____ October 1 – September 30 _____ January 1 – December 31
_____ July 1 – June 30 _____ Other _____

If a non-profit or governmental organization, complete the following:

_____ We expended less than \$750,000 in total federal financial assistance during the most recently completed fiscal year.

_____ We expended \$750,000 or more in total federal financial assistance during the most recently completed fiscal year. If so, complete the following:

_____ We expended only CNP funds.

_____ We expended federal funds from more than one program.

Signed

Date

The audit requirements for sponsors of the USDA Child Nutrition Programs are set forth by the Office of Management and Budget (OMB) in OMB Circular A-133 and in the USDA regulations. Sponsors must meet the audit requirements in order to participate in the programs.

- If the sponsor is a governmental or non-profit entity and expends \$750,000 or more in federal awards during its fiscal year period and receives funding from more than one type of federal program – sponsor must submit an organization-wide A-133 audit. If the sponsor expends \$750,000 or more and only has one federal program – sponsor may submit a program specific audit. The audits are due within 30 days after issuance or no later than 9 months after the end of sponsor's fiscal year.
- The sponsor must submit the required audit within the time frames. The audit regulations do not permit an extension of time beyond the 9-month period.
- The SDE audit staff will review the audit for compliance with applicable audit standards. If audit report is deficient, SDE will notify the sponsor of corrections needed. Audit report must meet standards within the 9-month due date.
- If audit report reflects findings and/or questioned costs, the sponsor should submit written corrective actions along with audit report. If not submitted, SDE will contact sponsor to respond within 30 days. SDE will work with the sponsor to resolve any findings pertaining directly or indirectly to CNP.
- When audit report is considered acceptable and resolved, SDE will notify sponsor in writing that audit file is closed.