FFVP – 2012/2013 Paper Application

Use this paper application to compile answers for an easy online application submission. You CANNOT submit a paper application.

1. Print Application and Compile Information - For an easy online application submission, print off the paper application, read the questions, compile your answers on paper, and then complete step 2 to enter/submit your answers in the online application. Each school building must apply separately, so you will want to print an application for each school building that is applying for the program. You MUST submit the information you gather in the online application. Faxed or mailed applications will not be accepted.

2. Complete and Submit the Online Application (link to application here). - Each school building must apply separately. Only ONE application per school building may be submitted. Once an application has been submitted online, it cannot be reopened or revised.

3. Print and Mail Signature Pages - Click the links below to print and sign (must be original and in ink) the signature pages and mail to the address listed below. Faxed signature pages and attachments will not be accepted.

School Food Manager Signature Page
Principal Signature Page
Superintendent Signature Page

MAIL Signature Pages to (remember, faxed signature pages and attachments will not be accepted).
Fresh Fruit and Vegetable Program Application
C/O Angela Barnes
Indiana Department of Education
School and Community Nutrition
151 W. Ohio St.
Indianapolis, IN 46204

Applications must be submitted online and signature pages must be postmarked by March 2, 2012. Applications failing to meet the described specifications will not be considered. Printing and retaining a copy of the application for your records is recommended. FFVP recipients for the 2012/2013 school year will be notified by phone, e-mail, or mail.

Thank you for your interest in the Fresh Fruit and Vegetable Program.

If you have any questions about the application, please contact Angela Barnes at 317-232-0875, 800-537-1142 ext. 20875, or abarnes@doe.in.gov.

You can click on the following link (or type the web address into your browser) to look up information requested in the application (Corporation Number, School Number, F/R Lunch % Eligible):
http://www.doe.in.gov/sites/default/files/nutrition/py-2012-free-and-reduced-october-2011.pdf

School Information

Corporation Name *

Corporation Agreement Number *
This should be a 4 digit number. To find this information, visit - http://www.doe.in.gov/sites/default/files/nutrition/py-2012-free-and-reduced-october-2011.pdf

School Building Name *

School Physical Address *

City *

Zip Code *

School Mailing Address *

City *

Zip Code *
Please enter only the 5 digit zip code (no 4 digit extension).

School Building/Site Number *
This should be a 3 or 4 digit number. To find this information, visit - http://www.doe.in.gov/sites/default/files/nutrition/py-2012-free-and-reduced-october-2011.pdf

School Lunch Meal Data

Percent Eligible for Free and Reduced Lunch: *
Please round and enter whole numbers (no decimals) i.e. 95 for 95% or 84 for 83.7%. To find this information, visit - http://www.doe.in.gov/sites/default/files/nutrition/py-2012-free-and-reduced-october-2011.pdf

School Data

School Enrollment for October 2011 *

Grade Levels *
Click all grade levels in this school

- [ ] Pre-K
- [ ] Kindergarten
- [ ] 1st Grade
- [ ] 2nd Grade
- [ ] 3rd Grade
- [ ] 4th Grade
- [ ] 5th Grade
- [ ] 6th Grade
- [ ] 7th Grade
- [ ] 8th Grade
- [ ] 9th Grade
- [ ] 10th Grade
- [ ] 11th Grade
- [ ] 12th Grade
- [ ] Other:

Meals Offered *
Check all that apply

- [ ] School Breakfast Program
- [ ] National School Lunch Program

Do you have a Food Service management Company or vended meals? *

- ( ) Yes
- ( ) No

Is your school a Team Nutriton School? *

- Yes
- No

Information for the FFVP Contact Person

First Name *
Please enter the first name of the FFVP contact person here

Last Name *
Please enter the last name of the FFVP contact person here

Position / Title *

- Food Service Director
- Food Service Manager
- Food Service Coordinator
- Nurse
- Registered Dietitian
- Physical Education Teacher
- Principal
- Other:

Mailing Address *
Please enter the mailing address for the FFVP contact person

City *

Zip Code *
Please enter only the 5 digit zip code (no 4 digit extension).

Email Address *

Phone Number *
Please include the area code.

Phone Ext.

Please respond to the following questions. The material should be well presented, clearly organized, complete, and concise. Please limit your responses to the space provided.

Project Responsibilities

a. Detail the responsibilities of each person (school food service, school administration, teachers, volunteers, others) that will assist in the implementation of the program, including planning, purchasing, storage, and distribution. *

b. What do you anticipate to be the major barrier to success and how will you overcome it? *

Effective and Efficient Use of Resources

a. How will you use your existing resources (building space and storage) to implement this program? *

b. Will you need additional equipment such as carts, refrigerator units, etc? Please describe. *

Means of Delivery to Students

a. This program is to be operated outside of regular meal service. Keeping that in mind, where and when will the program be operated? *

List each location and the time of service in the space provided below, for example: Classroom 1:00 - 2:00, Hallway 2:00 - 2:15

b. How many days per week will you provide a fruit or vegetable? *

Click the number of days per week you will be providing a fruit or vegetable.

- 1
- 2
- 3
- 4
- 5

Food Safety

What is your food safety plan when preparing, serving and storing fresh fruits and vegetables? *

Program Promotion and Activities

a. Promotion to Students/Parents/Staff *
How do you plan to promote and market the program? Please describe the means you will use to notify students, parents and staff about the program throughout the year.

b. Nutrition Education Activities *
Nutrition education is critical to the program's success. For too many children, the produce they see in school might be their first exposure to fresh fruits and vegetables. How would your school incorporate the Fresh Fruit and Vegetable Program into nutrition education and activities to promote good health? Describe any anticipated collaboration among teachers, parents, food service personnel, and others.

Partnerships

a. What partnerships do you have in place or plan to have in place which might assist in obtaining and distributing fruits & vegetables to students if federal funds become limited? These could be civic organizations, service organizations, small businesses, major corporations, non-profit organizations, Parent-Teacher Organizations, etc. *

b. How do you plan to integrate the FFVP with other efforts to either promote sound health and nutrition, reduce overweight and obesity, or promote physical activity? *

Wellness Policy

How does the district's wellness policy support the FFVP, or how will the wellness policy be changed to support the FFVP? *

Now you must enter this information in the online application. You CANNOT submit a paper application. If you have any questions about the application, please contact Angela Barnes at 317-232-0875, 800-537-1142 ext. 20875, or abarnes@doe.in.gov.