

## **Attachment A-1**

### **FNS-843 Report of Disqualification from Participation – Institution and Responsible Principals/Individuals**



Welcome To The National Disqualified List Application

Today's Date: Wed Aug 03, 2016 11:03:31 EDT

Please select the desired feature from the menu on the left.

Welcome **Nicole Boles, National Office user.**

**National Office Individual Recommend Remove Count: 6**  
**National Office Individual Recommend Delete Count: 1**

**National Office Institution Recommend Remove Count: 3**  
**National Office Institution Recommend Delete Count: 2**

Region Individual Actions

Region	Pending	Pending Remove	Pending Update	Pending Delete	Recommend Delete	Recommend Remove
Southwest	0	0	1	0	0	0
Mountain Plains	0	0	0	0	0	0
Southeast	0	1	0	0	0	0
Mid Atlantic	19	0	1	0	1	6
Midwest	0	0	0	0	0	0
Northeast	1	0	0	0	0	0
Western	0	0	0	0	0	0

Region Institution Actions

Region	Pending	Pending Remove	Pending Update	Pending Delete	Recommend Delete	Recommend Remove
Southwest	0	0	0	0	0	0
Mountain Plains	0	0	0	0	0	0
Southeast	0	0	0	0	0	0
Mid Atlantic	8	1	4	1	2	3
Midwest	0	0	0	0	0	0
Northeast	0	0	0	0	0	0
Western	0	0	0	0	0	0

Introduction

Section 243(c) of Public Law 106-224, the Agricultural Risk Protection Act of 2000, amended § 17(d)(5) of the Richard B. Russell National School Lunch Act (42 U.S.C. 1766 (d)(5)(E)(i) and (ii)) by requiring the Department of Agriculture to maintain a list of institutions, family day care home providers, and individuals that have been terminated or otherwise disqualified from Child and Adult Care Food Program (CACFP) participation. The law also required the Department to make the list available to State agencies for their use in reviewing applications to participate and to sponsoring organizations to ensure that they do not employ as principals any persons who are disqualified from the Program. This statutory mandate has been incorporated into § 226.6(c)(7) of the CACFP regulations.

OMB Number: 0584-0584

Expiration Date: XXXX/20xx

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0584. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

- Current Disqualifications
  - Disqualified Individuals List
  - Disqualified Institutions List
- Pending Actions
  - Pending Individual Actions
  - Pending Institution Actions
- Region Actions
  - Individual Actions
  - Institution Actions
- Search
  - Search Individual
  - Search Institution
  - Bulk Search Individual
  - Bulk Search Institution
- Add
  - Add Individual
  - Add Institution
- Recycle
  - Recycle Individuals
  - Recycle Institutions
- Admin Tasks
  - Manage Users - Add
  - Manage Users - Update



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- ▶ Disqualified Individuals List
- ▶ Disqualified Institutions List
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- ▶ Pending Individual Actions
- ▶ Pending Institution Actions
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- ▶ Individual Actions
- ▶ Institution Actions
- Search
- ▶ Search Individual
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- ▶ Bulk Search Individual
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**Add Institution**

**Uploaded Documentation**

Test.docx  
 Test.docx  
 Test.docx

\* **Institution Name :**

\* **Type of Institution :**

\* **DUNS Number :**

\* **Employer Id Number (EIN) :**

**Street Number :**

\* **Street Name/PO Box Number :**

**Additional Address Information :**

\* **City :**

\* **State/Province :**

\* **Zip Code :**

-

**Other Business Names :** (Please enter other business names below.)

**Disqualification Information**

\* **Program Type**

\* **State Agency Imposing Disqualification :**

\* **Region :**

\* **Termination Date :**

\* **Debt Owed :**

**Original Debt Amount :** (Please enter the amount in US dollars)

**Amount Paid :** (Please enter the amount in US dollars)

**Date Debt Paid in Full :**

**\*Disqualification Reasons:** (Please select one or more disqualification reasons as applicable)

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
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| <input type="checkbox"/> Failure to comply with the bid procedures and contract requirements of applicable Federal procurement regulations<br><input type="checkbox"/> Submission of false information on the institution's application, including but not limited to a determination that the institution has concealed a conviction for any activity that occurred during the past seven years and that indicates a lack of business integrity. A lack of business integrity includes fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, obstruction of justice, or any other activity indicating a lack of business integrity as defined by the State agency<br><input type="checkbox"/> Failure by a sponsoring organization to properly train or monitor sponsored facilities in accordance with §226.16(d);<br><input type="checkbox"/> Failure to properly implement and administer the day care home termination and administrative review provisions set forth at paragraph §226.6(i) and §226.16(l)<br><input type="checkbox"/> Failure to return to the State agency any advance payments that exceeded the amount earned for serving eligible meals, or failure to return disallowed start-up or expansion payments<br><input type="checkbox"/> Failure to adjust meal orders to conform to variations in the number of participants<br><input type="checkbox"/> Conviction of the institution or any of its principals for any activity that occurred during the past seven years and that indicates a lack of business integrity. A lack of business integrity includes fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, obstruction of justice, or any other activity indicating a lack of business integrity as defined by the State agency<br><input type="checkbox"/> Failure of a sponsoring organization to disburse payments to its facilities in accordance with the regulations at §226.16(g) and (h) or in accordance with its management plan<br><input type="checkbox"/> Claiming reimbursement for meals served by a for-profit child care center or a for-profit outside-school-hours care center during a calendar month in which less than 25 percent of the children in care (enrolled or licensed capacity, whichever is less) were eligible for free or reduced-price meals or were title XX beneficiaries<br><input type="checkbox"/> Use of day care home funds by a sponsoring organization to pay for the sponsoring organization's administrative expenses<br><input type="checkbox"/> Failure to operate the Program in conformance with the performance standards set forth in paragraphs (b)(1)(xviii) and (b)(2)(vii) of §226.6 | <input type="checkbox"/> The fact the institution or any of the institution's principals have been declared ineligible for any other publicly funded program by reason of violating that program's requirements. However, this prohibition does not apply if the institution or the principal has been fully reinstated in, or is now eligible to participate in, that program, including the payment of any debts owed<br><input type="checkbox"/> Failure by a sponsoring organization of day care homes to properly classify day care homes as tier I or tier II in accordance with §226.15(f);<br><input type="checkbox"/> Failure to perform any of the other financial and administrative responsibilities required by §226.6<br><input type="checkbox"/> Permitting an individual who is on the National disqualified list to serve in a principal capacity with the institution or, if a sponsoring organization, permitting such an individual to serve as a principal in a sponsored center or as a day care home<br><input type="checkbox"/> Failure to maintain adequate records<br><input type="checkbox"/> Claiming reimbursement for meals not served to participants<br><input type="checkbox"/> Claiming reimbursement for a significant number of meals that do not meet Program requirements<br><input type="checkbox"/> Claiming reimbursement for meals served by a for-profit adult day care center during a calendar month in which less than 25 percent of its enrolled adult participants were title XIX or title XX beneficiaries<br><input type="checkbox"/> Use of a food service management company that is in violation of health codes<br><input type="checkbox"/> Any other action affecting the institution's ability to administer the Program in accordance with Program requirements<br><input type="checkbox"/> Other |
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**Add Comments**

**Please add Responsible Principals/Individual here:**

RPI 1:

\*First Name:

\*Date of Birth:

Street Number:

\*City:

Middle Name:

Title:

\*Street Name/PO Box Number:

\*State/Province:

\*Last Name:

\*Program Debt:

Additional Address Information:

\*Zip Code:

Other Names: (Please enter other names below.)

First Name:

  
  
  
  


Middle Name:

  
  
  
  


Last Name: