



Attachment F.2- CERTIFIED AND DENIED APPLICANT SAMPLING FORM – NEWLY CERTIFIED

OMB Approval No.: 0584-0530 Approval Expires:

NSLP AND SBP ACCESS, PARTICIPATION, ELIGIBILITY, AND CERTIFICATION STUDY (APEC-II) STUDENT SAMPLE CONTACT INFORMATION FORM FOR NEWLY APPROVED FREE\REDUCED-PRICE SAMPLE

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection is 0584-0530. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, searching existing data resources, gather the data needed, and complete and review the information collected.



NATIONAL SCHOOL LUNCH AND SCHOOL BREAKFAST PROGRAM ACCESS, PARTICIPATION, ELIGIBILITY, AND CERTIFICATION STUDY (APEC-II)

STUDENT SAMPLE CONTACT INFORMATION FORM FOR NEWLY APPROVED FREE\REDUCED-PRICE SAMPLE

SCHOOL DISTRICT ID NUMBER:		SCHOOL DISTRICT NAME:
SCHOOL ID NUMBER:		SCHOOL NAME:
DATE:	/ / MONTH DAY YEAR	

I. NEWLY APPROVED FREE AND REDUCED-PRICE SAMPLE

SAMPLE RESULTS									
Ī	A. Stude	В.	C.	D.		E.	F.	G.	H.
	nt Numb	Selection	Selection Type						Telephone
	er			Grade Parent's Name		Mailing Address Nu			
1.		First: Middle:			First:	Street:	Area Code: ()		
					Middle:	City:			
				Last:			Last:	State: Zip: L.	
		Ι.		J.	Application/Certification [K. Dates:	Did student enroll in this school after the beginning of the school	
Applicatio			n Number:	Certification Status:	Application Date: MON		/ / □ Date Not Available NTH DAY YEAR	year?	
			Free	Certification Date		/ / / □ Date Not Available	If Yes, did student transfer from within the district?		
	Reduced Price			Certification Date	MON	TH DAY YEAR			
2.				First:			First:	Street:	Area Code: ()
				Middle:			Middle:	City:	
_				Last:			Last:	State: Zip:	
Annlicati		I. Application	Number:	J. Application/Certi Certification Status:		K. ertification Dates:		L. Did student enroll in this school after the beginning of the school year?	
	Application Date:			on Date: / / / /		∠ □ Yes □ No			
	Free					If Yes, did student transfer from within the district?			
	Reduced Pri		Reduced Price	Certification Date:		/ /			
3.									Area Code:
				First:			First:	Street:	()
		Middle:			Middle:		City:		
	Last:				Last:	State: Zip:			
	I. J. Application/Cert			K. n/Certification Dates:		Did student enroll in this school after the beginning of the school			
		Application Number:		Certification Status:	Application Date:		/ / □ Date Not Available TH DAY YEAR	year?	
				Free	Certification Date:		/ / / Date Not Available	If Yes, did student transfer from within the district?	
				Reduced Price	Certification Date.	II_ MON	TH DAY YEAR		
4.								□ Yes □ No	Area Code:
	First:				First:	Street:	()		
		Middle:			Middle:	City:			
		Last:			Last:	State: Zip:			
		l.		J.	Application/Certi	K. tification Dates:		L. Did student enroll in this school after the beginning of the school	
	Application Number:		Certification Status:	Application Date:	/ / □ Date Not Available MONTH DAY YEAR		year?		

	SAMPLE RESULTS								
	A. Stude nt	В.	C.	D.		E.	F.	G.	H.
	Numb er	Selection Order	Selection Type (M or R)	Student Na	me	Grade	Parent's Name	Mailing Address	Telephone Number
				Free	Certification Date:	_ MON	_ / _ / □ Date Not Available TH DAY YEAR	If Yes, did student transfer from within the district?	
				Reduced Price		_		□ Yes □ No	
5.				First:			First:	Street:	Area Code: ()
				Middle:			Middle:	City:	
				Last:			Last:	State: Zip:	
		I. J. Application/Certi Application Number: Certification Status:					L. Did student enroll in this school after the beginning of the school year?		
	Applic			Application Date: _ / □ Date Not Available MONTH DAY YEAR			□ Yes □ No		
		Reduced Price Certification Date:			Date: _ / □ Date Not Available MONTH DAY YEAR		If Yes, did student transfer from within the district?		
6.				First:			First:	Street:	Area Code: ()
			Middle:			Middle:	City:		
				Last:			Last:	State: Zip:	
	I. J. Application/Certif			K. ification Dates:		L. Did student enroll in this school after the beginning of the school year?			
		Application railber.		Certification Status:	Application Date:	_ MON ⁻	_ / / _ □ Date Not Available TH DAY YEAR	□ Yes □ No	
				Reduced Price	Certification Date:		_ / /	If Yes, did student transfer from within the district?	