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 U.S. DEPARTMENT OF AGRICULTURE MY ACCOUNT LOG OUT

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## Create School

OMB Control Number: 0584-XXXX

Expiration Date: XXXX-XX-XX

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Meals Program *(Select the USDA's School Meals Program(s) that your school participates in (select all that applies))*

- National School Lunch Program (NSLP)
- School Breakfast Program (SBP)
- Fresh Fruit & Vegetable Program (FFVP)
- Special Milk Program (SMP)
- Afterschool Snacks
- Seamless Summer Option (SSO)

### School Information

SCHOOL NAME

STREET ADDRESS

STREET ADDRESS LINE 2

CITY

DISTRICT

COUNTY

STATE

ZIP CODE

SCHOOL PHONE

TOTAL ENROLLMENT

SCHOOL WEBSITE (*http://www.example.com*)

## School Type

- Elementary
- Middle
- High
- Charter
- RCCI
- Other

Grade Levels

- Pre-K
- Kindergarten
- Grade 1
- Grade 2
- Grade 3
- Grade 4
- Grade 5
- Grade 6
- Grade 7
- Grade 8
- Grade 9
- Grade 10
- Grade 11
- Grade 12

## Team Nutrition Information

TEAM NUTRITION LEADER NAME

TEAM NUTRITION LEADER EMAIL

TEAM NUTRITION LEADER PHONE

SCHOOL PRINCIPAL NAME

SCHOOL PRINCIPAL EMAIL

CAFETERIA MANAGER NAME

CAFETERIA MANAGER EMAIL ADDRESS

WELLNESS COORDINATOR NAME

WELLNESS COORDINATOR EMAIL ADDRESS

## Close School

Close

LEGACY URL *(Temporary field to be used for Migration audit.)*

SAVE AS

Save