OMB Number: 0584-XXXX Expiration Date: xx/xx/20xx

School Programs State Agency Implementation Plan Template Child Nutrition Emergency Operational Costs Reimbursement Programs

- State agencies are required to return this completed implementation plan template, as described in the memorandum, by **April 26, 2021**.
- State agencies that do not submit a complete implementation plan (#1-11) to the satisfaction of FNS will not receive reimbursements under the applicable programs.
- If your State agency also applied for participation in the Child and Adult Care Food Program (CACFP) Reimbursement Program, a separate implementation plan must be submitted for each.

1.	State Agency: Click or tap here to enter text.										
2.	Contact Information: Click or tap here to enter text.										
3.	CN Programs Administered (select all that apply): □School Programs										
	□Child and Adult Care Food Program (CACFP)										
4.	Reimbursement Programs applied for (select all that apply*):										
	□School Programs										
	□School Programs □Child and Adult Care Food Program (CACFP)										
5.	□Child and Adult Care Food Program (CACFP) *To assist with tracking and accuracy, selections in above elements 3 & 4 should reflect										

6. Updates to Payment Calculation and Disbursement Plan

Are there any substantive updates or additional details to provide regarding the process by which payments will be calculated and disbursed to program operators, as detailed in the State agency's Program application? Alternatively, are there specific updates, additions, or clarifications to the previously submitted application that FNS instructed the State agency to address on this implementation plan? If yes, please include here:

7. Summary of School Meals Reimbursements

Please provide the following information:

• Total number of eligible School Food Authorities (SFAs) anticipated to receive payments and included in reimbursement formula calculations:

Click or tap here to enter text.

- Total of estimated payments due to eligible SFAs for each reimbursement month based on statutory formula calculations*:
 - March 2020: Click or tap here to enter text.
 April 2020: Click or tap here to enter text.
 May 2020: Click or tap here to enter text.
 June 2020: Click or tap here to enter text.

8. Summary of State Agency Reimbursement Total

Please provide, the total estimated reimbursement needed to make payments to eligible SFAs based on statutory formula calculations:

• School Meals: Click or tap here to enter text.

^{*}Please remember to use the correct formula calculations, as applicable.

9. Projected Timeline for Payment Disbursement

In this section, please estimate the timeline necessary for the distribution of payments to program operators once funds are received from FNS. Detail key process steps and dates, where applicable. This includes a requested or target date for the initial receipt of funds*, which should be no less than 30 days from the date of your implementation plan's submission.

When establishing your implementation timeline, please note the following recommended deadlines:

- State agencies begin disbursing funds to program operators: **June 30, 2021**;
- State agencies request additional funds from FNS (if applicable): **July 31, 2021**,
- Funds obligation deadline: September 30, 2021;
- Funds liquidation deadline: **January 31, 2022**.

^{*}This date may vary (earlier or later) based on a number of factors, including timeliness/completeness of State agency implementation plan submission, final execution of financial award documents, and availability of apportioned funds. The target funding date is for planning/projection purposes only.

10. Program Operations Narratives

The following information must be addressed in this section:

a. How will the State agency ensure the accuracy of payment calculations? Please describe any validation processes that will be used, if applicable.

b. How will the State agency notify local program operators of payments and disseminate information/guidance on the use of funds?

c. The State agency will be expected to provide FNS with basic summary information on the implementation progress for these reimbursement programs, as well as the usage of funds by program operators. FNS anticipates that this information will be solicited from the State agency on a periodic basis via standard grant reporting mechanisms. In addition, the State agency will be expected to maintain and provide detailed information on its usage of State administrative funds made available under these programs.

Please describe what processes and procedures the State agency will/might employ to ensure availability of this information.

11. Compliance Assurance Statement

As a condition of participation, State agency acknowledges that it will document and retain records of all activities related to its administration of this reimbursement program, consistent with standard review and recordkeeping requirements of the Child Nutrition Programs. In addition, the State will agree to all terms and conditions of Federal grant making documents to be executed for the purposes of awarding funds, consistent with the requirements of 2 CFR part 200.

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12. Supplemental Attachments

If the State agency needs or wishes to include any supplemental attachments with its application submission, please list them below, or indicate 'none':

Paperwork Burden Statement

This information is being collected to assist the Food and Nutrition Service in assessing State agencies' capacity to implement and administer the Child Nutrition Emergency Operational Costs Reimbursement Programs. This is a mandatory collection and FNS will use the information to provide funding to State agencies. This collection does not request any personally identifiable information under the Privacy Act of 1974. 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-[xxxx]. The time required to complete this information collection is estimated to average 10 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.