

Submission Studio

Form Name: FNS-874 (10-15)
Form Description: Local Education Agency Second Review of Applications
Program: Child Nutrition Programs
State: WV
Agency Code: 5499999 **Agency Name:** Test Agency
Program Time: January 2019
Submission Type: Annual **Revision:** 0
Submission Status: New Submission

Analyze Save Edit Check Post Quit

Report Remarks

1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 1. NO CHANGE	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 2. Changed to FREE	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 2. Changed to FREE a. Incomplete application error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 2. Changed to FREE b. Categorical eligibility error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 2. Changed to FREE c. Gross income calculation error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 2. Changed to FREE d. Other error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 3. Changed to REDUCED PRICE	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 3. Changed to REDUCED PRICE a. Incomplete application error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 3. Changed to REDUCED PRICE b. Categorical eligibility error	1-5C. Results of Second Review by Initial Eligibility Determination Benefit Type: PAID 3. Changed to REDUCED PRICE c. Gross income calculation error

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