Appendix G. FNS-10 Report of School Program Operations

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Submission Studio

Form Description:

Form Name:

FNS-10 (4-12) Report of School Program Operations

Program: Child Nutrition Programs

State: Agency Code:

Program Time: Submission Type: Revision:

Agency Name:

Submission Status: New Submission

Part A - (Complete Monthly) Part B - (Complete Once a Year as Specified) Remarks												
	Part A - (Complete Monthly)											
Item (Include Residential Child Care Institutions (RCCIs) in Items 5 thru 8.)	Paid (A)	Free (B)	Reduced Price (C)	Total (D)	Average Daily Meals (E)							
5. National School Lunch Program												
a. Total lunches served in the NSLP (Include all lunches reported in 5b)												
Actual			Sto.									
Estimated												
Total												
b1. Lunches served in school food authorities that qualify the state for additional payment												
Actual												
Estimated												
Total												
b2. Lunches served in school food authorities certified for performance based reimbursement												
Actual												
Estimated												
Total												
c. Total afterschool snacks served in all approved schools and sites (Include in Col. B, all free snacks reported in item 5d, below)												
Actual												
Estimated												
Total												
d. Total afterschool snacks served in area eligible schools and sites												
Actual												
Estimated												
Total												
6. School Breakfast Program (Include schools with severe need)												
Actual												
Estimated												
Total												
7. School Breakfast Program (Severe need only)												
Actual												
Estimated												
Total												
8. Commodity Schools (Lunches only)												
Actual												

9. Special Milk Program a. Schools (Include Residential Child Care Institutions)

Estimated

Total

Actual

Total

Estimated

Estimated

Total

Actual

b. Nonresidential Child Care Institutions

c. Summer Camps

Actual

Estimated

Total

Part A - (Complete Monthly) Part B - (Complete On	nce a Year as Specified) Remarks	5								
Part B - (Complete Once a Year as Specified)										
Item	Paid (A)	F	ree (B)	Reduced Price (C)		Total (D)		Average Daily Meals (E)		
10. Report no. of meals served in private schools only										
a. National School Lunch Program										
b. Afterschool snacks (include area eligible snacks reported in 10c.)			Ĭ							
c. Afterschool snacks served in area eligible schools and sites			1							
d. School Breakfast Program (Include severe need)										
e. Severe Need School Breakfast Program			Ĭ							
11. Report no. of meals served in RCCIs only										
a. National School Lunch Program							TI.			
b. NSLP Snacks										
c. School Breakfast Program (Include severe need)										
d. Severe Need School Breakfast Program			i							
Operating a Program This Month	National School Lunch (F)	Snacks (All schs and sites, incl Col. H) (G)	NSLP Snacks (Area Elig. (H)	Only) School Breakfast (Incl. Se	ev. Nd) School	Breakfast (Sev. Nd Only) (3)	Commodity (K) Special Milk (L)		
12a. Number of Public Schools						Ţ				
12b. Membership (Enrollment)						1				
13a. Number of Private Schools						T)				
13b. Membership (Enrollment)						ĬĪ.				
14a. Number of Residential Child Care Institutions						ŢĮ.				
14b. Membership (Enrollment)						T.				
15. Number of Children Approved For:										
a. Free Lunches Total										
b. Reduced-price Lunches Total										
16. Number of Nonresidential Child Care Institutions										
17. Number of Summer Camps operating a program for the month of July only										



Food Programs

► Homepage Navigation Video

Online Help Video

Welcome to the Food Programs Reporting System (FPRS)

Please see About FPRS for details on available programs and form versions.

Welcome Susan Weeks.

The FPRS application allows the entry, validation, certification, and posting of data reported by participants in FNS programs.

FPRS Announcements

- OMB Control Number: 0584-0594
- Expiration Date: 07/31/2023

Public reporting burden for this collection of information is estimated to vary from .17 minutes to 98 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. The public burden statement is accessible for each form/worksheet in multiple places. It can be found on the Excel tab while in Submission Studio or under the Help tab by selecting OMB approved forms /worksheets and instructions by form. The PDF file will open and the burden statement will either be at the top or bottom of the form.