



Community Action and Human Services Department  
Overtown Transit Village North  
701 NW 1<sup>st</sup> Court, Suite 1000  
Miami, FL 33136  
T 786-469-4600 F 786-469-4703  
[www.miamidade.gov](http://www.miamidade.gov)

**Carlos A. Gimenez, Mayor**

January 10, 2012

Coordinating Supervisor  
Summer Food Services Program Site

Dear Coordinating Supervisor:

Attached is the Summer Food Service Program Application for the 2012 program year. Please ensure that all questions on the application are completed accurately. **A copy of your organization's 501c3 tax exempt document must be submitted along with the application.** If you are submitting more than one site application, the 501c3 documentation must be attached to each application. Additionally, each site application must have the name of the individual in charge as well as an alternate. Please ensure that there is no duplication of names on the applications if more than one application is submitted. Failure to submit the application as requested may result in disapproval of the application.

All completed applications must be submitted to Miami-Dade County Community Action and Human Services Department, Summer Food Service Program, Attention: Ruthe White, 701 NW 1<sup>st</sup> Court, 9<sup>th</sup> Floor, Miami, Florida 33136. The application can also be e-mailed to [ppancha@miamidade.gov](mailto:ppancha@miamidade.gov) or [ruwhite@miamidade.gov](mailto:ruwhite@miamidade.gov) . **The due date is April 30, 2012.** Applications received after April 30, 2012 may not be considered.

**The Summer Food Service Program will operate from June 11, 2012 to August 10, 2012.**

Below is a schedule of trainings for the Summer Food Service Program. It is **mandatory** that the two individuals listed on the application be in attendance **per site** in order to participate. The training dates, times, and locations are:

1. May 29, 2012                      Ophelia E. Brown-Lawson Center  
9:30 am-11:30 am                16405 N. W. 25<sup>th</sup> Ave., Miami Gardens, 33056
2. May 29, 2012                      Ophelia E. Brown-Lawson Center  
2:00 pm-4:00 pm                16405 N. W. 25<sup>th</sup> Ave., Miami Gardens, 33056
3. May 30, 2012                      Frankie Shannon Rolle Neighborhood Center  
9:30 am-11:30 am                3750 S. Dixie Highway, Miami, 33143
4. May 31, 2012                      Isaac A. Withers Enrichment Center, Cafeteria  
2:00 pm-4:00 pm                21300 S.W. 122<sup>nd</sup> Avenue, Miami, 33170

5. June 1, 2012                      Overtown Village North, 1<sup>st</sup> Floor, Training Room  
9:30 am-11:30 am                701 N.W. 1<sup>st</sup> Court, Miami, 33136

If the site name has changed, please include the organization's current name on the application with the previous name in parenthesis, i.e. June Public Summer Jamboree (Kids Camp). A change of site name and/or location from previous year participation will classify the site as a new site. Please indicate on the site application when this occurs.

If you have any questions please contact me at (786) 469-4692 or Rani Panchanathan at (786) 469-4789. You may also e-mail your questions at the above e-mail addresses.

Sincerely,

Ruthe White, MPA, RD, LD  
Nutrition Services Coordinator

C: Lucia Davis-Raiford, CAHS Director  
Jane McQueen, Head Start/Early Head Start Director

MIAMI-DADE COUNTY COMMUNITY ACTION AGENCY  
SUMMER FOOD SERVICE PROGRAM  
2012 SITE APPLICATION



701 N.W 1st Court  
MIAMI, FLORIDA 33130  
PHONE: (786) 469-4622  
FAX: (786)469-4756



**Please check as needed:**

- NEW SITE  Previous Year Participation  
 Change of Name  Change of Address

1). \* NAME OF MAIN ORGANIZATION: \_\_\_\_\_

\* Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Address: \_\_\_\_\_

\* City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\* Coordinating Supervisor's Name: \_\_\_\_\_

\* E-mail Address: \_\_\_\_\_

(Print Clearly)

2). NAME OF SITE SERVING MEALS: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3). Two names and Title of people in Charge at Site mandatory:

A. Name 1: \_\_\_\_\_ Title: \_\_\_\_\_

B. Name 2: \_\_\_\_\_ Title: \_\_\_\_\_

4). Type of Site: (Check One Only)

- Recreational Center  School  Summer Camp  Public Housing  
 Park  Church  Social Services  Other (Specify): \_\_\_\_\_

**Note:** Earliest time lunches can be delivered to site: \_\_\_\_\_ (AM)  
Participation on the program will be based on approval of application , site  
Inspection, signed agreement.



