



Community Action and Human Services Department
Overtown Transit Village North
701 NW 1st Court, Suite 1000
Miami, FL 33136
T 786-469-4600 F 786-469-4703
www.miamidade.gov

Carlos A. Gimenez, Mayor

January 14, 2013

Coordinating Supervisor
Summer Food Services Program Site

Dear Coordinating Supervisor:

Attached is the Summer Food Service Program Application for the 2013 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 for 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 1st Court, 9th Floor, Miami, Florida 33136. The application can also be e-mailed to ppancha@miamidade.gov or ruwhite@miamidade.gov . **The due date is April 30, 2013.**

The Summer Food Service Program will operate from June 10, 2013 to August 16, 2013. 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 as follows:

- | | |
|--|--|
| 1. May 28, 2013, Tuesday
9:30 am-11:30 am | North Dade Neighborhood Center, Rm 118, & 119
16405 N. W. 25 th Ave., Miami Gardens, 33054 |
| 2. May 28, 2013, Tuesday
2:00 pm-4:00 pm | North Dade Neighborhood Center, Rm 118, & 119
16405 N. W. 25 th Ave., Miami Gardens, 33054 |

3. May 29, 2013, Wednesday
9:30 am-11:30 am
Frankie Shannon Rolle Neighborhood Center
3750 S. Dixie Highway, Miami, 33143
4. May 30, 2013, Thursday
9:30 am -11:30 am
South Dade Government Center, Room 203
10710 SW 211 Street, Miami, 33170
5. May 30, 2013, Thursday
2:00 pm-4:00 pm
South Dade Government Center, Room 203
10710 SW 211 Street, Miami, 33170
6. May 31, 2013, Friday
9:30 am-11:30 am
Overtown Village North, 1st Floor, Training Room
701 N.W. 1st 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
Special Projects Administrator

C: Lucia Davis-Raiford, CAHSD Director
Joy Vickers, Interim Service Area Coordinator

MIAMI-DADE COUNTY COMMUNITY ACTION HUMAN SERVICES DEPARTMENT
SUMMER FOOD SERVICE PROGRAM
2013 SITE APPLICATION



701 N.W 1st Court
 MIAMI, FLORIDA 33136
 PHONE: (786) 469-4622
 FAX: (786)469-4756



Please COMPLETE each section. DO NOT LEAVE any section blank:

- NEW SITE** (Pre-Approval needed) Previous Year Participation
 Change of Name (Pre-Approval needed) Change of Address (Pre-Approval needed)

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 must attend mandatory training:

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 meals can be delivered to site: _____ (AM)
Participation on the program will be based on approval of application , site
Inspection, signed agreement.



NOTE: There must be a three hour period between the beginning of one meal period and beginning another. Breakfast can last 1 hour; Lunch can last 2 hours; Snack 1 hour.

EXAMPLE: Breakfast Served – From: 8:00 – 9:00 am (1 hr.)
Lunch Served – From: 12:00 to 2:00 pm (2hrs.)
Snack Served – From: 3:00 to 4:00 pm (1 hr.)

6). Daily Attendance

No. of BREAKFAST:

No. of LUNCHES:

No. of SNACKS:

7). Times meals are served

From _____ To _____

From _____ To _____

From _____ To _____

TIP: PLACE YOUR MEAL COUNT ACCORDING TO PREVIOUS YEAR CHILDREN PARTICIPATION.
ONLY TWO MEALS ALLOWED FOR EACH SITE.

8). SITE OPERATING DATES: BEGINNING: _____ / _____ / 2013
M D Y
ENDING: _____ / _____ / 2013

Total number of weeks: _____

IMPORTANT: The Program will be serving meals from June 10, 2013 to August 16, 2013

9). Does site have adequate refrigeration available for (Check One Only).

All Meals

Leftover Meals Only

10). Does the site have indoor facilities or shelter in case of inclement weather? Yes No

11). List the name of Dade County Public School(s) attended by children at the site:
(List more than one if applicable)

1. _____ 2. _____

3. _____ 4. _____

12). What types of organized activities are planned at the site other than lunch program?

1. _____ 2. _____ 3. _____

An enrollment list of participants will be required to be maintained at site before service begins.

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ALL ORGANIZATIONS MUST SEND COPY OF CURRENT 501 (C) (3) FORM along with the application

_____/_____/_____
Signature Title Date

Should you need further information contact Rani Panchanathan at (786)469-4789.

Miami-Dade County Community Action Human Services Department
Summer Food Service Program
Sponsor Site Manager Agreement

Name of Site : _____ Site # _____

Address of Site: _____

City: _____ State: _____ Zip: _____

Person in Charge of Site: _____

Telephone of the person in charge: _____

The person named above agrees to:

1. Serve meals to all needy children 18 years of age and under (or persons 19 and over who are mentally or physically disabled and participating in a public or private nonprofit school program for the mentally or physically disabled).
2. Ensure that no meals are removed from the site with the exception of transfer of meals and field trips with prior approval from Sponsor Representative.
3. Provide adequate supervision during meal service with accurate "Point of Service" meal counts.
4. Maintain and submit on a timely basis such reports and records as required by the Sponsor including the daily meal count sheets.
5. Immediately report, to the Sponsor, any changes in the number of meals required as attendance fluctuates.
6. Report immediately any other problems in regard to meal service.
7. Abide by all SFSP regulations and special instructions that have been provided by the Sponsor.
8. Attend Sponsor training sessions.
9. Refuse to receive meals that are spoiled, frozen, damaged, or not within appropriate temperature ranges.
10. Be responsible to the program for the reimbursement of all disallowed meals due to your negligence.
11. Immediately notify the Sponsor of any meal service times that need to be changed or are not being met.
12. Immediately notify the Sponsor if meals are not delivered at the scheduled times.
13. Comply with civil rights laws and regulations.
14. Ensure the trained Site Supervisor or approved alternate contact is on site during meal service.
15. Not accept meals from another sponsor.
16. Site is not receiving federal funds from other sources for meals.
17. Ensure a copy of the Department of Health inspection is submitted to the Sponsor.
18. Ensure "And Justice for All" poster is displayed.
19. Ensure site maintains required documents on site (e.g., Meal Counts, Site Supervisors Record of Meals Served)

This is to certify that I have read and agree to the above guidelines and understand that any violation of these guidelines may result in prosecution under applicable State and Federal Statutes. **I have not signed an agreement for sponsorship with any other agency.** In addition, if there is any violation of the above mentioned rules, the sponsor reserves the right to immediately terminate the site and to not consider the site for renewal in the following year.

Site Manager Signature

Rani Pancharatkar, CAHSD
Sponsor Signature

Date