



## REQUEST FOR PROPOSAL

After-School Meals

APPLICATIONS DEADLINE: Rolling

Grant Awards: On quarterly cycle beginning Jan. 1

The Child and Adult Care Food Program At-Risk (CACFP At-Risk) is a federally funded program that after school programs.

**After-School Enrichment Programs:** CACFP reimburses eligible programs for serving nutritious meals and snacks to children and teens after their school days ends and on non-school days during the school year.

In Minnesota, CACFP At-Risk is significantly under-utilized. According to data from the Minnesota Departments of Human Services and Education there more than 400 after-school youth program sites that could expand meal offerings to include a supper meal.

We have identified three initial not-in-school-time opportunities to feed hungry children:

- Start a CACFP At-Risk Meal Program at your school
- Increase enrollment by youth programs in CACFP At-Risk Meal Program
- Transition school sites currently offering snacks through the School Nutrition Program (SNP) to CACFP At-Risk suppers

Grants ranging from \$2,500 to \$5,000 will be awarded to individual and multi-site After-School Program Sponsors, and potential sponsors to expand the number of children who receive nutritious meals through the CACFP At-Risk program.

**Grants will be evaluated based on these criteria:**

- Approved CACFP sponsor
- Ability to become a CACFP sponsor
- Site located in area eligible location
- Number of children to be served
- Number of days of operation
- Ability to pilot new strategies to increase the number of CACFP At-Risk meals
- Child Nutrition Index Data

\_\_\_\_\_  
Date of application

### Organization Information

**If you are a Child Care Center or Community Organization, please fill out this form.**

**Name of Organization:**

**Type of Organization:**



<b>Street Address:</b>	<b>City, State, Zip:</b>
<b>Phone Number:</b>	<b>Website:</b>
<b>Name/Title of Organization Leader:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>Name/Title of Application Contact Person:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>Program Partners:</b>	<b>Site Locations:</b>

**If you are a School or School District, please fill out this form.**

<b>School Name:</b>	<b>School District Name:</b>
<b>Street Address:</b>	<b>City, State, Zip:</b>
<b>Phone Number:</b>	<b>Website:</b>
<b>Superintendent:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>Principal:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>District Business Official/Manager:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>Name/Title of Application Contact Person:</b>	<b>Direct Phone Number:</b>  <b>Email:</b>
<b>Total Enrollment:</b>	<b>Grades:</b>

<b>Proposal Information</b>
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- 1. Provide a brief narrative of the project and its goals. What do you hope to accomplish?**



**5. What is the timeline for the project? What are key milestones?**

Phase	Goal	Timeline
1		
2		
3		

**6. How will you measure your progress and outcomes?**

**Budget**

Dollar amount requested: \$ \_\_\_\_\_

Total project budget, if greater than request: \$ \_\_\_\_\_

**Authorization**

\_\_\_\_\_  
Printed Name of Organization Leader

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**APPLICATION SUBMISSION AND NOTIFICATION**



111 Third Avenue South, Suite 190 | Minneapolis, MN 55401  
www.hungerimpactpartners.org | 612-208-0139

Please e-mail a full-set of application materials to [info@hungerimpactpartners.org](mailto:info@hungerimpactpartners.org). A complete application should include:

- The name of your organization typed in the subject line, and “proposal.”
- This signed proposal document.
- IRS 501c3 Determination Letter or equivalent (for your organization or for the umbrella organization/fiscal agent which you fall under, with a brief statement explaining the relationship between your agency and the umbrella organization/fiscal agent) OR if you are a faith-based organization and don't have a 501c3 letter, submit your Fourteen Point Test. Government entities, including public schools, are exempt from this requirement.
- List of your Board of Directors, including their titles, professional affiliations and when their board terms expire; government entities, please indicate titles of person responsible for the proposal and his/her immediate supervisor.
- Most recently completed Form 990, if available and pertinent.
- Itemized project budget, in whatever format you use.

Successful applicants will be notified by e-mail. Expect to receive a grant agreement, which will require a signature, before funds can be released.