Instructions for the 2023 NSLP Equipment Assistance Grant Application

Application Submittal

The Application is an interactive .pdf so you are able to, complete the form electronically. For signatures, please have it signed by the appropriate agency official with either a wet signature (in blue ink) or digitally, and Email a .pdf copy to:

Megan Jensby, Program Officer m.jensby@agri.nv.gov

AND

NDA Division of Food and Nutrition fnd@agri.nv.gov

Subject: 2023 NSLPE Grant Application – (SFA Name)

Receipt of Submissions

NDA must receive all submissions by email no later than 5:00 p.m. PST, November 17, 2023. Incomplete submissions or those received after the deadline will not be considered for funding. Please note that **NDA will not accept mailed or faxed submissions**.

For more information and to view grant requirements, see the 2023 Equipment Assistance Grant RFA and resources posted on our website:

http://agri.nv.gov/Administration/NSLP_Equipment_Assistance_Grant/

Follow the steps below to apply for the 2023 Equipment Assistance Grant:

1. Read the 2023 NSLP Equipment Assistance Grant RFA.
2. Read the Instructions for Completing the 2023 Equipment Assistance Grant Application (this document).
3. Complete the **Application (Sections 1-4), Central Kitchen and/or School Kitchen(s) form** and **Signed Assurances** form (ensure signatures are in BLUE ink or Certified Electronic signature).
4. Obtain at least 3 quotes for each piece of equipment and include with your application (Applicants must include three quotes for each piece of equipment requested, and funding will be granted based on the lowest quote. For the quote to be considered, it must be over $1,000 per piece of equipment requested including shipping and installation costs).
5. Submit your completed application package according to the above instructions under Application Submittal.

Please see additional instructions below for the completion of the forms.

Section 1 – School Food Authority Information	
Use Section 1 to submit information about the SFA. Submit only one copy of Section 1.	
This SFA received grant funds in 2017-2020 Equipment Assistance Grants	Check either yes or no to indicate that the SFA received funds in 2017-2022 national School Lunch Program Equipment Assistance Grant

2300 East Saint Louis Ave
Las Vegas, NV 89104

405 South 21st St.
Sparks, NV 89431

4780 East Idaho St.
Elko, NV 89801

agri.nv.gov

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	Equipment Assistance Grants. **Priority will be given to those SFAs who did not receive funds from those grants**.
Name of SFA	Name of the school district, charter school, private school, or residential childcare institution (RCCI).
County	County in which the SFA conducts business.
SFA Address, City, Zip Code	Mailing Address of the SFA.
Name of Food Service Director (FSD)	Provide the name of the FSD. If you do not have an FSD, enter the name of the employee who is the contact for this grant.
E-mail Address of FSD	FSD Email Address
Telephone number of FSD	Enter the area code and phone number of the FSD.
Name of Grant Coordinator	Provide the name of the contact person for this grant (Grant Coordinator – GC).
E-Mail Address of GC	Provide the e-mail address of the GC.
Telephone number of GC	Enter the area code and telephone number of the contact person.
Name of Superintendent / Director / Administrator	Enter the name of the district, school, or county superintendent; for an RCCI, enter the Director's name; for a charter school, enter the Administrator's name.
Total number of sites participating under SFA's NSLP agreement	Enter the total number of sites participating under your NSLP Agreement, not just the number of sites for which you are applying for grant funds.
SFA total amount of grant funds requested (for all sites)	Enter the total amount of grant funding you are requesting for your district/agency.
Total number of sites for which SFA is applying	Enter the total number of sites for which you are applying. (No more than five.)
Does this district or agency have a "Capitalization Threshold" for equipment?	School districts and Charter Schools: Enter the amount your Local Educational agency uses for its capitalization threshold. A "capitalization threshold" is defined as the dollar value at which an agency differentiates between items that are supplies versus equipment; therefore, some smaller equipment may be a supply because of its value. Each local school board may designate a specific dollar amount for equipment to capitalize. This is the dollar value at which your school/district considers a piece of equipment an asset in their financial statements. Be prepared to submit documentation from the SFA's board policy that indicates the capitalization threshold. NOTE: a local school board may adopt a lower capitalization threshold for food service equipment. (All other SFAs that do not use a capitalization threshold enter zero ("0"). If the SFA does not have a capitalization threshold, the NDA will assign a capitalization threshold of $5,000.)
SFA Cafeteria Fund operating balance as of (enter date) is:	Enter the amount of funding in your cafeteria account as of the current date and enter the date.

SFA one-month average operating expense x3 months	Enter the amount that the SFA spends (on average) in one month on food services expenses. This includes salaries, food, laundry, utilities, janitorial, etc.
Excess net cash resources (A2 – A1)	Subtract A2 from A1 to calculate the SFA's net cash resources. Please note that SFAs with excess net cash resources may be ineligible for a grant.
What amount from any of the following funding sources…	If the SFA has any other source of funding that is available for the purchase of equipment, indicate that source and the amount available.
Reporting Requirements	The 2014 Agriculture Appropriations Act (AAA) requires states and sub-recipient agencies (e.g., SFAs) to report certain information regarding the use of AAA funds. Please enter if the requested equipment is necessary to serve meals at schools that do not currently offer lunch, breakfast, or both. If this question is not applicable, check 'None of the above'. Also indicate whether the equipment will increase participation in either the NSLP or the School Breakfast Program.
SFA Notes	This is the place for you to enter notes about the grant and your answers above. This section is not scored.
Certification/Signature	This section must be signed and dated in blue ink by the District or Agency official. Signatures certify that those who have signed the application agree with all the information contained within the entire application.
Assurances	
See assurances attached to 2023 Equipment Assistance Grant Application	
Section 2 – Site Information	
Complete one Site Application for *each* site for which you are applying for grant funds.	
Name of SFA	Name of school district, charter school, private school, or RCCI.
Name of Site	Enter the name of the site for which you are requesting grant funds.
Site Address, City, Zip Code	Address of the site, not the SFA.
Total Funds Requested for this Site	Enter the total amount of grant funds requested for this site.
This site participates in:	Check the appropriate box to indicate the program(s) that the site participates in.
A. Total number of students enrolled at this site on October 1, 2023:	Enter the number of students enrolled at each site as of October 1, 2023.
B. Enter the number of operating days in October 2023:	Enter the total number of days that the site served reimbursable meals during the month of October 2023. If the site was not participating, leave blank.
C. Enter total of A1 multiplied by B1	Multiply the number of operating days entered in B1 by the total enrollment entered in A1. This identifies the total amount of

(represents total possible meals)	meals that the site would serve if all children participated in the meal program. If the site was not participating, leave blank.
As a result of purchasing the requested equipment, the SFA anticipates that participation in the National School Lunch Program will increase by:	Enter an estimated percentage by which you believe the participation in the breakfast program will increase as a result of the equipment purchases.
Based on the increase in participations, the SFA anticipates that the number of students affected will be:	Based on your estimated percentage of potential increase in participation, calculate and enter the number of students affected.
Use this space to provide information that demonstrates this site's need for equipment (attach additional pages as needed):	Use this space to provide additional information that demonstrates this site's need. Justification for the items and why they are needed Attach additional pages as necessary and title the page "Demonstrating Site Need." Be sure to indicate the site's name on any additional pages.
Section 3 – Site Level Equipment Request	
Use this form to identify the items of equipment that will be placed within the site. **_One_** copy of this form must accompany each "Site Information" sheet.	
SFA Name and Address	Enter the SFA's name and address.
Site Name and Address	Enter the site's name and address.
Equipment being purchased or repaired	Enter the equipment(s) that you are requesting.
Requested number of units	Enter the number of units of the equipment that you plan to purchase or repair for this site.
Total requested cost	Enter the total cost of each item of equipment, e.g., if the unit cost is $5,000 and you are purchasing 3 units, the total cost would be $15,000. **The cost must include shipping, handling, and installation.** - If the equipment is point of sale, include the hardware and software. - DO NOT include the cost of vendor travel expenses as this is unallowable. - Enter as whole dollars (e.g., $5,551, not $5.550.71), using standard rounding procedures where you round up for $0.50 and above and round down for $0.49 and below.
This equipment is: ❑ New ❑ Replacement ❑ Repair	Check whether the equipment will be new for the site (never had this piece of equipment at this site), replaces an existing piece of equipment (whether the existing piece is unrepairable or limits your ability to increase participation), or if the equipment is necessary to repair an existing piece of equipment.

Current equipment	Check this box if the current equipment is unrepairable, limits your ability to increase participation, or is outdated/worn.
Section 4 – Equipment Budget and Need	
Use this form to identify the equipment items that the SFA proposes to purchase at one or more sites. Complete as many copies of this form as is necessary to include all items of equipment.	
Name of SFA	Name of the school district, charter school, private school, or RCCI.
Equipment item name and brief description	Enter the name of the equipment that you are requesting to purchase under the grant.
This equipment will be housed at the central kitchen or at a site that prepares for multiple sites	If the equipment will be housed at a central kitchen or other site that prepares meals for two or more other sites, check "yes." Otherwise, check "no."
What is the unit cost of this equipment? (enter as whole dollars, include installation, tax, and shipping)	Enter as a whole dollar the amount you are requesting for the equipment. (e.g. $5,551, not $5,550.72) - Include the cost of installation, tax, and shipping. - For point-of-sale equipment, include the cost of both hardware and software. - Do not include the cost of vendor related travel as this is an unallowable expense. - Use standard rounding procedures where you round up for $0.50 and above and round down for $0.49 and below.
Quantity of units requested	In the box entitled "Quantity," enter the total number of units of this equipment you are purchasing.
Equipment total (unit cost x quantity)	Enter the total amount you will spend on each item of equipment. To obtain this total, multiply the unit cost by the number for units. Enter as a whole dollar the amount you are requesting for the equipment. (e.g. $5,551, not $5,550.72) - Include the cost of installation, tax, and shipping. - For point-of-sale equipment, include the cost of both hardware and software. - Do not include the cost of vendor related travel as this is an unallowable expense. - Use standard rounding procedures where you round up for $0.50 and above and round down for $0.49 and below.
Number of schools benefitting from this equipment	Enter the total number of schools for which you are purchasing this equipment.
This cost is based on:	Obtain three price quotes for each piece of equipment requested and submit them with the completed application. Per federal regulations, you are required to purchase the item with the lowest cost.

This equipment supports efforts to:	Check as many boxes as apply under these categories. If selecting "other," provide an explanation.
Using the space below, explain why this equipment is necessary to support the efforts above; be specific.	Explain why and how the equipment you wish to purchase is necessary to support your efforts to increase participation, impact nutritional quality, improve food safety, and/or improve energy efficiency.

Drug-Free Workplace
All SFAs participating in any of the Child Nutrition Programs must agree to provide a drug free workplace and to follow all federal regulations that apply to drug free workplaces.

Application Scoring Criteria
See Application Scoring Criteria document

After all required signatures are collected, submit the documents in .pdf form to:
Nevada Department of Agriculture, Division of Food and Nutrition
Email: fnd@agri.nv.gov
AND
Megan Jensby, Program Officer I
Email: m.jensby@agri.nv.gov
Subject: 2023 NSLPE Grant Application – (SFA
Name)
ALL APPLICATIONS MUST BE RECEIVED BY THE NEVADA DEPARTMENT OF
AGRICULTURE, FOOD & NUTRITION DIVISION VIA EMAIL BY:

5:00 PM, November 17, 2023

Please direct questions to:
Megan Jensby, Program Officer I
Phone: (775) 221-9962
Email: m.jensby@agri.nv.gov