2024-2026 NSLP Equipment Assistance Grant Application

Division of Food and Nutrition



	Section 3 – Si	ite Information						
	Complete this form for eac	ch site requesting equipment	t.					
SF	A's can apply for up to \$20,00	00 per site for no more than	5 sites.					
	ted will be used to provide me							
	all pertinent sites. These reque	ests must be less than \$100,	000.					
Name of School Foo	d Authority:							
Name of Site:								
Ivallie of Site.								
			Zip Code:					
Address:	Address: City:							
Total funds request	ted for this site: \$							
This site participates								
□ National School L	Lunch Program (NSLP)	hool Breakfast Program (SI	BP)					
Total number of stu	udents enrolled at this site or	n October 31, 2024						
Number of operatir								
	ig days in October 2024							
Total possible meal	ls served in October 2024							
A a a magult of mumol	aging the negulated	<u> </u>						
	nasing the requested							
	equipment, the SFA anticipates that the							
	National School Lunch							
Program will increa								
	entage by which you believe							
purchased	e because of the equipment							
	nasing the requested							
_								
	A anticipates that the							
	School Breakfast Program							
will increase by*:								
*Enter an estimated perce participation will increase								
purchased	e because of the equipment							
	ase in participation, the	1						
	at the number of students							
affected will be:								

Section 4- Site Level Equipment Request List										
Complete this form for each site. Please note that SFA's can apply for up to \$20,000 per site for no more than 5 sites. From the equipment budget section, identify which pieces will be placed in this school, indicate if the equipment is new to the school, replaces an existing piece of equipment, or is needed to repair an existing piece of equipment. If replacing an existing piece of equipment, indicated the of the equipment and if the current equipment is unrepairable, limits participation, and/or is outdated/worn/inoperable. Please list shipping and handling costs separate from item cost.										
SFA Name				Address						
Site Name			A	Address						
Equipment being purchased or repaired.	Requested number of units:	Item cost:	Shipp cos	_	This equipment is:	Current equipment:	NDA use only			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	□ Approved □ Denied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	□ Approved □ Denied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	□ Approved □ Denied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	ApprovedDenied			
					 New Replacement For Renovation 	 Unrepairable Limits Participation Outdated/Worn 	☐ Approved ☐ Denied			