## **School Food Authority Verification Report Checklist**

**All school food authorities** (SFAs) must complete the SFA Verification Collection Report in SNPWeb by December 15, including SFAs and Residential Child Care Institutions (RCCIs) that are not required to conduct verification. Only SFAs approved to use traditional National School Lunch Program (NSLP) counting and claiming methods (required to collect meal applications) must also conduct the verification process.

The ***SFA Verification Collection Report*** is accessed in SNPWeb>Applications>Verification Report. Select *Modify* for 2023–2024 to create or work with the report. Select *View* to see the data in the report without making changes. See the General Information and **section by section instructions below** to determine the report areas that must be completed for the SFA type.

**SFAs required to conduct verification** should visit the Virginia Department of Education, Office of School Nutrition Programs (VDOE-SNP) [Training and Resources webpage](https://www.doe.virginia.gov/programs-services/school-operations-support-services/school-nutrition/training-resources) to learn about the RISE.com e-learning platform and how to access the VDOE-SNP e-learning video, *Verification of School Meal Applications.*

**To begin the verification process, SFAs required to conduct verification must complete Sections 1–4 plus Questions 5-3 (select *STANDARD*) and 5-4 on October 1 or shortly after to confirm the required verification sample size in Question 5-5.**Only complete Column A, *as of October 1*, for the questions to generate the sample size. Column B, *as of October 31*, will be completed later. The report will show error messages that can be ignored until the October 31 data is entered.

### **SFA Verification Collection Report Section-by-Section Instructions**

#### General Information

*All SFAs must complete this section.*

#### Section 1

*All SFAs must complete this section.*

* **Question 1-1** A and B: For **schools only.** Report data as of October 31.
* **Question 1-2, 1-2a, and 1-2b**: For **RCCIs** only. Report data as of October 31.

#### Section 2

***Only SFAs with one or more schools operating a special provision*** *(Community Eligibility Provision (CEP), Provision 2 or 3) must complete this section. Fields will be grayed out if they do not apply to your SFA. SFAs using* ***Provision 2 for breakfast only*** *complete Question 2-5.*

* **Question 2-1 and 2-2**: Complete these questions if one or more schools participate in **Provision 2 or 3 for BOTH the School Breakfast Program (SBP) and NSLP.**
* **Question 2-3**: Complete this question if one of more schools participate in **CEP.**
* **Question 2-4**: Not applicable in Virginia.
* **Question 2-5**: Complete this question **only** if one or more sites participate in **Provision 2 for SBP only.**

#### Section 3

*All SFAs must complete certain questions in this section.*

* **Question 3-1**: ***Only******divisionwide CEP, RCCIs with no day students and SFAs with divisionwide Provision 2 or 3 for both breakfast and lunch in a non-base year complete this section****.* Check the box and you are finished with this section. Do not complete any other questions in this section. *SFAs required to complete verification skip this question and complete the questions below.*
* **Question 3-2**: *Only SFAs required to conduct verification complete this question.*

Record the number of students directly certified (DC) as free eligible using SNAP. **Do not include the students enrolled in CEP schools in this total.** Do not include other free DC students or Medicaid Reduced-Price DC students in this question.

* **Question 3-3**: *Only SFAs required to conduct verification complete this question.*

Record the number of students directly certified as free eligible by all other methods (TANF, Migrant, Homeless, Runaway, Head Start, Foster Care, and Medicaid **Free only**). **Do not include the students enrolled in CEP schools in this total.** Do **NOT** record Medicaid Reduced-price DC in this total.

* **Question 3-4**: All SFAs answering 3-2 and 3-3, should report “0”. Virginia does not use the SNAP letter method for DC.

#### Section 4

***Only*** *SFAs that collect household applications and are required to conduct verification must complete this section. The number of applications reported in Column A must be as of* ***October 1*** *and the number of students reported in Column B must be as of* ***October 31 Do not complete Column B data before October 31****.*

* **Question 4-1**: Report the number of applications approved categorically eligible free with a SNAP or TANF case number in **Column A as of October 1**, and the number of students on those applications **as of October 31 in Column B**.
* **Question 4-2**: Report the number of applications approved as free based on income determination and household size in **Column A as of October 1**, and the number of students on those applications **as of October 31 in Column B.**
* **Question 4-3**: Report the number of applications approved as reduced-price based on income determinations and household size in **Column A as of October 1**, and the number of students on those applications **as of October 31 in Column B.**

#### T-1- Total Free Eligible Students Reported

*This is a system generated total of the number of free eligible students reported in questions 4-1 and 4-2, Column B as of October 31.*

* If the total is incorrect, check the data.
* Exception: For partial CEP SFAs, the number of free eligible in T-1 will be less than the number reported in the October claim for partial CEP SFAs. This is because the claim and the SNPWeb Monthly Eligibility Report for October will include a calculated number of free eligible for CEP schools using the claiming percentage.

#### T-2 Total Reduced Eligible Student Reported

*This is a system generated total number of reduced-price eligible students reported in question 4-3, Column B as of October 31.*

* If the total is incorrect, check the data entered.
* The number of Directly Certified Medicaid Reduced-price students are not included in this question or anywhere in this report.

#### Section 5

*All SFAs must complete certain questions in this section.*

* **Question 5-1:** **Only SFAs that are not required to conduct verification check this box.** (SFAs with divisionwide CEP, RCCIs with no day students, and SFAs with divisionwide Provision 2 or 3 for both breakfast and lunch in a non-base year). **If you were required to check the box, you have finished this section.** Do not complete any other questions. **SFAs required to conduct verification, do not check the box in this question, instead complete the rest of the questions in this section.**
* **Question 5-2:** *Only SFAs required to conduct verification complete this question.* Select the radio button that accurately reflects when verification was completed. A corrective action plan must be submitted with the report if the SFA did not meet the deadline of November 15.
* **Question 5-3:** *Only SFAs required to conduct verification complete this question.* **All SFAs conducting verification must select *standard***. Alternate sample sizes must be pre-approved by the VDOE-SNP.
* **Question 5-4:** *Only SFAs required to conduct verification complete this question.* Report the **total number of error-prone applications that were in the entire pool of applications as of October 1**. The total error-prone applications should be available in the report of approved applications on file as of October 1 from the SFA’s eligibility software. **DO NOT report the number of error-prone applications selected for verification.**
* **Question 5-5:** *This is a system-generated number of applications that must be selected for verification. This number is calculated using the number of approved applications in questions 4-1, 4-2, and 4-3 and multiplied by three percent and then rounded to the next whole number.* **If this number does not agree with the number generated from your local software, check the data in questions 4-1, 4-2, and 4-3. Contact your VDOE-SNP regional specialist with questions.**
* **Question 5-6:** Only *SFAs that conducted verification must complete this question and all must check this box.* Virginia did not choose to use direct verification.
* **Question 5-7:** *Only SFAs required to conduct verification complete this question.* Report “0” in A and B.
* **Question 5-8:** *Only SFAs required to conduct verification complete this question.*

This section captures the results of verification by original benefit type.

* + A. Free Categorically Eligible - Responses should be “0” because categorically eligible applications do not meet the verification qualifications of an error-prone application.
	+ B. Income - Report the number of income applications selected for verification in column A and the number of students in column B for each type of result.

#### VC-1

*Only SFAs required to conduct verification complete this question.*

**Total number of applications verified for cause.**

* Enter only the number of applications verified for cause above and in addition to the required sample size, if any. Include the results of verification for these additional applications, if any, in **Question 5-8.**

#### Corrective Action Plan Attachments

*Attach the corrective action plan if required.*

* If the SFA did not meet the required November 15 deadline to complete verification, a corrective action plan must be submitted with this report.
* A template for a verification corrective action plan is available in SNPWeb>Download Forms>VDOE Prototypes-Verification.
* Complete the corrective action plan and upload it as an attachment to this report before submitting.