Attachment A

SCNP Memo No. 2023-2024-83

May 23, 2024



Team Nutrition Readiness and Retention Training Program Training Development Application and Scoring Rubric

**Application due by June 14, 2024**

Application Questions

1. Please enter the following contact information:
	1. First Name: Type in your response.
	2. Last Name: Type in your response.
	3. Email Address: Type in your response.
	4. Phone Number: Type in your response.
	5. Position Title: Type in your response.
	6. School Division: Type in your response.
	7. Superintendent’s Region: Type in your response.

The in-person culinary training should further develop cafeteria managers’ knowledge and skills in preparing meals that align with the current USDA school meal patterns and focus on scratch cooking, locally sourced (Virginia) foods, and student inspired offerings. Please refer to Attachment B for training requirements.

Describe in detail your plans for this training. Include your criteria for selecting a training provider, the format of the training, length and number of workshops, topics that will be covered in the training, location of the training, and how the training will benefit your school nutrition program.

* 1. Type in your response.

Describe how you plan to evaluate the training. Evaluation may include a pre- and post-survey, demonstration of skills learned that are verified by the training provider, etc.

* 1. Type in your response.

Please complete the following table for your training program, which includes key activities, planned completion dates, and person(s) responsible. Please add/delete rows as needed.

|  |  |  |
| --- | --- | --- |
| **Activity** | **Planned Completion Date** | **Person(s) Responsible** |
| *e.g., Secure training provider* | *e.g., August 31, 2024* | *e.g., School nutrition director* |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

Please complete the following budget table demonstrating how you plan to spend grant funds for each budget line item expense. For each of the following budget line items, include the planned expenses within the budget line item, how the expenses support the goals of the training, the calculation used to determine the total expense amount, and the total expense amount for the budget line item. Please expand rows as needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Planned Expenses** | **How Expenses Support Goals of the Training** | **Calculation of Total Expense Amount** | **Totals** |
| **Training Provider** | *e.g., Chef ($1,000) + Registered Dietitian ($1,000)* | *e.g., The training will focus on knife skills, flavoring foods with herbs and spices, and garnishing foods taught by the chef, and the registered dietitian will train attendees on the Dietary Guidelines and school meal patterns.* | *e.g., $1,000 + $1,000 = $2,000* | *e.g., $2,000* |
| **Equipment** |  |  |  |  |
| **Supplies** |  |  |  |  |
| **Other** |  |  |  |  |

Signatures

I hereby attest that Team Nutrition Readiness and Retention Training Program funds will be used in accordance with Program guidelines as described in SCNP Memo #2023-2024-83, Attachment B. I further certify that the information included in this application is true to the best of my knowledge.

**School Nutrition Director**

Signature of School Nutrition Director

Printed Name of School Nutrition Director

Date**Superintendent**

Signature of Superintendent

Printed Name of Superintendent

Date

Evaluation Rubric

**Question 2:** The in-person culinary training should further develop cafeteria managers’ knowledge and skills in preparing meals that align with the current USDA school meal patterns and focus on scratch cooking, locally sourced (Virginia) foods, and student inspired offerings. Please refer to Attachment B for training requirements.

Describe in detail your plans for this training. Include your criteria for selecting a training provider, the format of the training, length and number of workshops, topics that will be covered in the training, location of the training, and how the training will benefit your school nutrition program.

* 0 Points: No response or training does not reflect the goals of the Team Nutrition Readiness and Retention Training Program.
* 1 Point: Vague explanation lacking depth and detail.
* 3 Points: Moderately describes training but lacks substance in their training plans.
* 5 Points: Demonstrates clear plans for the training and articulates how the training reflects the goals of the Team Nutrition Readiness and Retention Training Program.

**Question 3:** Describe how you plan to evaluate the training. Evaluation may include a pre- and post-survey, demonstration of skills learned that are verified by the training provider, etc.

* 0 Points: No response.
* 1 Point: Vague explanation lacking depth and detail.
* 3 Points: Moderately describes evaluation but lacks substance in their plans.
* 5 Points: Demonstrates clear plans and effective strategies for evaluating training.

**Question 4:** Please complete the following table for your training program, which includes key activities, planned completion dates, and person(s) responsible. Please add/delete rows as needed.

* 0 Points: No response.
* 1 Point: Vague timeline lacking detail.
* 3 Points: Moderate completion of timeline table.
* 5 Points: Provides a clear timeline with details for key activities. Timeline is practical and key activities reflect the goals of the Team Nutrition Readiness and Retention Training Program.

**Question 5:** Please complete the following budget table demonstrating how you plan to spend grant funds for each budget line item expense. For each of the following budget line items, include the planned expenses within the budget line item, how the expenses support the goals of the training, the calculation used to determine the total expense amount, and the total expense amount for the budget line item. Please expand rows as needed.

* 0 Points: No response.
* 1 Point: Vague budget lacking depth and detail.
* 3 Points: Moderate description of expenses for each budget line item.
* 5 Points: Provides a clear, detailed description of expenses for each budget line item. Budget is practical for the division’s training goals and reflects the goals of the Team Nutrition Readiness and Retention Training Program.