

SFA/School District: _____

LEA #: _____

SCHEDULE C-21 SY 2020-2021 SEAMLESS SUMMER OPTION (SSO) Funded through the ADE

Complete for schools or locations which will be sites for the Seamless Summer Option. Add additional pages as needed.

	Sample Site 1	SERVING SITE 1				SERVING SITE 2						
School Name	Starr Elem											
Phone Number	501-555-1212											
Serving Site Address	202 S. Main, Little Rock											
# Locations Students Consume Meals	1 of 2											
Year Round School? Yes or No	NO											
School LEA Number	099-09-009											
Designated Site Manager	B. L. Jones											
SSO Start Date	MM/DD/YY											
SSO End Date	MM/DD/YY											
Type of Site *	Open											
Method of Notification of Public	Newspaper											
Organization Operating Site (if applicable)												
Circle Age/Grade Grouping – For Open & Restricted Open Site ONLY – Circle Most Common Used (can be more than one) – SEE #14 OF THE INSTRUCTIONS	Breakfast PK K-5 6-8 9-12	BREAKFAST	PK	K-5	6-8	9-12	BREAKFAST	PK	K-5	6-8	9-12	
	Lunch PK K-5 K-8 6-8 9-12	LUNCH	PK	K-5	K-8	6-8	9-12	LUNCH	PK	K-5	K-8	6-8
	Days	Times	Days	Times		Days	Times					
Breakfast	M - F	7 - 8										
Lunch	M - F	12 - 1										
Snack												
Supper												
CN district employee responsible for meal service & record keeping. (May be the same as the designated site manager)	B. L. Jones											

The maximum number of programs (breakfast, lunch, snack, and supper) that can be offered per site is 2. Site SHALL NOT offer both lunch and supper.

* Contact the ADE, CNU for additional information for a "Closed enrolled site" or "Restricted open site"

ADE CNU USE ONLY						
Schools with 50% or greater students eligible for free or reduced price meals or school located in an attendance area with 50% or greater of the students eligible for free and reduced price meals.						
Site qualifies for area eligible based on enrollment.	YES	NO	YES	NO	YES	NO
Site qualifies for area eligible based on attendance area.	YES	NO	YES	NO	YES	NO
Site qualifies for area eligible based on census data.	YES	NO	YES	NO	YES	NO

ADE Use Only – Approved by:	
_____ ADE/CNU	_____ Date
_____ Area eligible	_____ Non-area eligible
_____ Reviewer initials	_____ Area Specialist initials
_____ Entered CNU DB	_____ Online Claims System