



Local Education Agency Name _____

Part II
Section I
Application Checklist

This Checklist must be included with the District/LEA and Kitchen/School Serving Site application. Mark an X in each box and send this checklist along with all application documents to:

Attn: ARRA Equipment Assistance Grant
Arkansas Department of Education
Child Nutrition Unit
2020 W 3rd Street
Suite 404
Little Rock, AR 72205

LEA/District Name: _____

Part II, Section I

- A. Application Checklist
- B. Application Cover Page
 - Local Education Agency Information
 - ARRA Equipment Grant Assurances
 - Application Authorization and Certification
 - Local Education Agency (LEA) Summary of Grant Funds Requested with **ORIGINAL SIGNATURES**

Part II, Section II

- Kitchen/School Serving Site Application(s). Complete One Application for **EACH** Kitchen/School Serving Site to Be Considered For the ARRA Equipment Assistance Grant.
- List Kitchen/School Serving Site(s) in Order of LEA's Priority for Funding Consideration by ADE, CNU. If applying for only one kitchen/serving site, list that site on #1.
 1. _____
 2. _____
 3. _____
 4. _____

*Add Additional Pages if Necessary



Local Education Agency Name _____

Part II
Section I
Application Cover Page

To be completed by Local Education Agency (District/LEA)

County _____

District/LEA # _____

District/LEA Name: _____

District/LEA Mailing Address: _____

District/LEA Physical Address: _____

District/LEA Phone Number: _____

District/LEA Fax Number: _____

District/LEA Grant Contact Name: _____

District/LEA Grant Contact Phone Number: _____

District/LEA Grant Contact Email: _____

Child Nutrition Director Name: _____

Child Nutrition Director Phone Number: _____

Child Nutrition Director Email: _____



Local Education Agency Name _____

Part II
Section I
Application Cover Page

LEA Equipment Grant Assurances:

LEA will:

1. Not submit paid invoice or pay for equipment until equipment is deemed functional and operational by LEA/Child Nutrition Director.
2. Ensure food service employees are properly trained on operation, safe use and cleaning of equipment.
3. Ensure copies of instruction manual(s) are duplicated and placed in kitchen work area, food service manager's office and Child Nutrition Director's office.
4. Assume financial obligation for appropriate utilities, e.g. gas, water, electricity, within three feet of equipment. Installation costs within three feet are reimbursable as part of grant award, with documentation.
5. Ensure all equipment purchased with ARRA equipment assistance funds be placed in the facility approved for grant funds for a period of not less than three years without transfer to another facility.
6. Maintain up-to-date equipment inventory with appropriate and applicable amortization schedule.
7. Not resale equipment within five years from purchase date.
8. Ensure open and free competition for equipment (See Section II, Regulatory Requirements, *Quick Reference, Kitchen Design and Equipment*, ADE, CNU, 2004).
9. Ensure response to ADE, CNU data and report requests based on ARRA or USDA requirements.
10. Ensure all deadlines must be met in order to progress to Second Round grant awards.
11. Ensure that funds are expended in accordance with the LEA's approved application by no later than Wednesday, June 30, 2010.
12. Agrees to comply with all provisions thereof, and with any instructions or procedures issued in connection with accepting Federal funds in accordance with the applicable regulations.
13. Assures that the ARRA Equipment Assistance Grant will be administered and implemented in compliance with all applicable statutes, regulations, and policies related to approved award(s).



Local Education Agency Name _____

**Part II
Section I
Application Cover Page**

APPLICANT AUTHORIZATION AND CERTIFICATION

The applicant hereby applies for 2009 Food Service Equipment Assistance Grant funds available under the American Recovery and Reinvestment Act (ARRA) of 2009. The LEA agrees to comply with all provisions thereof, and with any instructions or procedures issued in connection with accepting Federal funds in accordance with the applicable regulations. The applicant assures that the Equipment Assistance Grant will be administered and implemented in compliance with all applicable statutes, regulations, and policies related to approved award(s).

Only actual costs of approved equipment will be reimbursed, not to exceed the ARRA equipment grant award.

In order to provide the maximum use of Federal dollars in local Districts, ARRA funds not obligated at the LEA level by Monday, August 10, 2009 will be awarded by ADE, CNU in a Second Round award, based on a point system evaluation of the original grant application(s). The applicant will ensure that funds are expended in accordance with the LEA’s approved application by no later than Wednesday, June 30, 2010.

The Arkansas Department of Education (ADE) defines equipment for the purpose of the ARRA equipment assistance grant as “articles of nonexpendable, tangible property with a useful life of more than one year and a per unit acquisition cost of \$1000 or more”.

Award Question:

All LEA grant requests will not be fully funded. Funding will be awarded on a point system evaluation using criteria listed on the Criteria Scoring Form. Will the LEA accept partial funding for a specific piece of equipment listed on each kitchen/school site application based priority established by the LEA/District and ADE, CNU rank? YES NO

If NO, list kitchen/school sites where the LEA/District will NOT accept ARRA equipment funds unless all pieces of equipment are awarded.

ADE, CNU reserves the right to ask for more information
Child Nutrition Director must be available to answer additional questions. Please provide contact phone number for Non 12 month contract person(s) this summer
Phone Number: () _____



Local Education Agency Name _____

Part II
Section I
Application Cover Page
Summary of Grant Funds Requested

TOTAL AMOUNT REQUESTED. *List in order of funding priority.*

(This sum is equal to the total estimated equipment costs from each kitchen/school site application)

School LEA Number	Kitchen/School Site by Priority	Total Cost

GRAND TOTAL District/LEA Grant Funds Requested	\$
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TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

SIGNATURES

 Typed Name of District/LEA Superintendent

 Typed Name of District/LEA Child Nutrition Director

 Signature of District/LEA Superintendent

 Signature of District/LEA Child Nutrition Director

 Signature of District/LEA General Business Manager

 Phone No. District/LEA General Business Manager