


# Checking status!

“Pending submission” means you need to take action!

“Pending approval” means hang tight, we are getting to it to review!



| Select | Fiscal Year | Start Date | End Date   | Status             |
|--------|-------------|------------|------------|--------------------|
| Select | 2024        | 10/01/2023 | 09/30/2024 | Pending Submission |
| Select | 2023        | 10/01/2022 | 09/30/2023 | Restored           |
| Select | 2022        | 10/01/2021 | 09/30/2022 | Restored           |
| Select | 2021        | 10/01/2020 | 09/30/2021 | Restored           |
| Select | 2020        | 10/01/2019 | 09/30/2020 | Approved           |

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# Check your alerts!

Child Nutrition - Child & Adult Care Food Program (CACFP)

Enter Claims

Home

Rates/Eligibility Scales

Resource Library

Training Calendar

Log Out

Privacy Statement

CACFP Message - Welcome to Child Nutrition - Child & Adult Care Food Program (CACFP).

Alerts for user: ttest

Alerts: (Default view shows New and Open Alerts)

View New/Open | View New | View Closed

| Select | Alert Status | Alert Reason   | Open Date  | View Date | Closed Date |
|--------|--------------|----------------|------------|-----------|-------------|
| Select | New          | Incomplete App | 11/17/2023 |           |             |

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Businesses Associated with ttest

| Select | Agreement # | TIN     | Name         | Phone        |
|--------|-------------|---------|--------------|--------------|
| Select |             | 0101010 | TEST HOP HOP | 405 522-5043 |

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Status: In Process

Reason: Incomplete App

ITIN/EIN: 0101010

Comments: Application items/Forms for - TEST HOP HOP have information that needs to be updated or is missing; look at the application checklist or contact your assigned CNP Coordinator for additional information. The application cannot be processed until the information is updated/completed. See Comments Below: PLEASE UPDATE FORM AND RESUBMIT

Open Date: 11/17/2023 10:47:01 AM

View Date: 11/17/2023 10:47:45 AM

Close Date:

Save

# Check your details and comments!

Click "Detail" then read the message that appears in the middle of the checklist.

| On-Line Documents  |                                     |                                     | By CNP                              |  |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <a href="#">Viability, Capability, &amp; Accountability Questionnaire-CACFP/FDCH-1</a> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> <a href="#">Details</a>                       |
| <a href="#">Sponsor Application for Participation - CACFP/FDCH-2</a>                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> <a href="#">Details</a>                       |
| <a href="#">Meal Policy Statement - CACFP/FDCH-4</a>                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> 11/17/2023 <a href="#">Details</a> |
| <a href="#">Civil Rights Assurance/Compliance Review - CACFP/FDCH-5</a>                | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> <a href="#">Details</a>                       |
| <a href="#">Public Release Verification - CACFP/FDCH-6</a>                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> <a href="#">Details</a>                       |
| <a href="#">State Agency/Institution Agreement - CACFP/FDCH-7</a>                      | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> <a href="#">Details</a>                       |
| <a href="#">Disclosure of Lobbying Activities - CACFP/FDCH-9</a>                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> 11/17/2023 <a href="#">Details</a> |
| <a href="#">Application for Participation - CACFP-1</a>                                | <input type="checkbox"/>            | <input type="checkbox"/> 0 of 2     | <input type="checkbox"/> 0 of 2     | <input type="checkbox"/> <a href="#">Details</a>                       |
| PLEASE UPDATE FORM AND RESUBMIT  |                                     |                                     |                                     |  |

You may even see comments at the bottom of the page and who made them!

| CNP Comments for Application          |                                       |            |                                       |                   |
|---------------------------------------|---------------------------------------|------------|---------------------------------------|-------------------|
| Select                                | Delete                                | Date       | Comment                               | User              |
| <input type="button" value="Select"/> | <input type="button" value="Delete"/> | 08/21/2023 | CORRECTIONS NEEDED- SEE DETAILS ABOVE | KASSANDRA REDDELL |
| 1                                     |                                       |            |                                       |                   |