| BUSINESS & ! | FINANCE DIVISION |
|-------------------------|------------------|
| Report No. | 26 |

OGDENSBURG CITY SCHOOL DISTRICT OGDENSBURG, NEW YORK

| | LM 1960/17/2 |
|--------------------|--|
| SUBJECT: | Resolution to Approve Free and Reduced Price Meals Policy Statement for the 2020-2021 School Year |
| DATE: | August 24, 2020 |
| REASON FOR BOARD | CONSIDERATION: |
| | The Board of Education should adopt Federal Policy Guidelines if the District is to participate in Free and Reduced Breakfast and Lunch Programs. |
| FACTS AND ANALYSIS | S: |
| | The School District must adopt the attached Federal Guidelines if participation is desired in the Free and Reduced Price Meal Program for the 2020-2021 school year. |
| RECOMMENDED ACT | TION: |
| | Moved by and supported by that, having the recommendation of the Superintendent of Schools, the Federal Free and Reduced Price Meals Policy Statement shall be and is hereby approved by the Board of Education of the Ogdensburg City School District on this 24 th day of August, 2020. |
| APPROVED FOR PRES | SENTATION TO THE BOARD: |
| | V. VV. O. |

KK/alf Attachment

KEEP THIS FORM ON FILE. DO NOT RETURN TO SED

CERTIFICATION OF ACCEPTANCE FOR DISTRICTS AND NONPUBLIC SCHOOLS

(Residential Child Care Facilities must complete the form on Attachment IV)

Please complete the following information during the annual renewal process on the Child Nutrition Management System and **retain on file** for examination by members of this Department or USDA during a review of your Child Nutrition Program. **Do not send the Certification of Acceptance to NYSED.**

SCHOOL FOOD AUTHORITY NAME: Ogdensburg City School District

12-Digit LEA Code: 512300010000

The governing body of this School Food Authority accepts this Free and Reduced Price Meal or Special Milk Program Policy Statement, including the Family Income Eligibility Criteria and all required attachments and as indicated below:

Titles of Designated Officials

A. REVIEWING OFFICIAL Brian Mitchell

Address & Telephone 1100 State Street Ogdensburg, NY 13669

315-393-0900 ext. 31928

B. HEARING OFFICIAL Kevin Kendall Superintendent

Address & Telephone 1100 State Street Ogdensburg, NY 13669

315-393-0900 ext. 31901

C. VERIFICATION OFFICIAL Brian Mitchell

Address & Telephone 1100 STATE STREET OGDENSBURG, NY 13669

315-393-0900 ext. 31920

An officer of the Board of Education or chairman of the community school board, pastor or executive director of the corporation operating a private or parochial school, or the headmaster or principal of a nonpublic school must sign this form.

ORIGINAL SIGNATURE OF SCHOOL OFFICIAL

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2020-2021

 The Reviewing and Verification Official may be the same person. The Hearing Official cannot be the Reviewing or Verification Official.