|  |
| --- |
| **PART III – REQUIRED PROGRAM INFORMATION** |

1. **Sponsor Information:**
* School District/Sponsoring Organization:
	+ - **Has this organization previously received a MA FRESH Grant?**
		[ ] Yes, years \_\_\_\_\_\_\_   [ ]  No
		- **Has this organization received a USDA Farm to School Grant in the past 5 years**? [ ]  Yes [ ]  No
	+ **This application seeks funding to (Pick one):**

[ ]  Begin a farm to school initiative (applicant is not aware of any active, formalized farm to school efforts that integrate local[[1]](#footnote-1) food, agricultural education and student health into curriculum or meal service)

[ ]  Expand the capacity, scope, or offerings of an existing, active farm to school initiative. (Applicant is engaged in formal farm to school efforts and would like to broaden the number of students, teachers, staff, etc, impacted by these efforts) *Please note: MA FRESH Grant funding cannot be used to continue existing activities. Applicants must demonstrate that funds will be utilized to expand current farm to school activities and must clearly articulate how funding will support efforts that are additional or new.*

* + **Is this application on behalf of (i) an individual school, collection of specific schools within a district or single childcare program or (ii) an entire district or early education program sponsorship with multiple facilities?** (Pick one) *Please* *note: this response should be used to guide what meal site data you provide in Section II of your application.*

[ ]  Individual school/early education program or a collection of specific schools within a district/early education sponsorship

[ ]  Entire school district/an early education sponsorship with multiple facilities

* **What funding level are you applying for? (Pick one)**

[ ]  New K-12 Farm to School Initiative Grants: Between $5,000 - $50,000

[ ]  New Early Education Farm to School Initiative Grants: Between $3,000 - $25,000 (ONLY Complete Sections I. Sponsor Information, II. Meal Site Data, III. Proposal sections 1, 2, 3, 6 & 7, IV. Budget/Budget Narrative and V. Signatures)

[ ]  Expanding Current K-12 Farm to School Initiative Grants: Between $5,000 - $50,000

[ ]  Expanding Current Early Education Farm to School Initiative Grants: $3,000 - $50,000

* **Select the primary focus of your project (Check all that apply):**

[ ]  Building a new school garden for students

[ ]  Building a new indoor growing operation for students

[ ]  Expanding educational programming to promote food literacy or nutrition education for students around growing/cooking/eating local foods

[ ]  Student field trip(s) to local farm/food producer

[ ]  Before/after school programming that supports food literacy, nutrition education or access to local foods for students and families

[ ]  Professional development and training for educators to bring food literacy activities or curriculum to their students

[ ]  Purchasing kitchen equipment for CACFP or NSLP meal programs that will expand a program’s capacity to prepare and serve unprocessed or minimally processed local foods

[ ]  Professional development and training for school food service professionals to enhance school meal offerings

[ ]  Other (please briefly describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Do you have one or more existing onsite (indoor or outdoor) School Garden(s)?**

[ ]  Yes [ ]  No

* + **If you answered yes, how is the produce from the onsite School Garden utilized?** (Check all that apply)

[ ]  Integration into school meal offerings

[ ]  Classroom consumption

[ ]  Consumption during before/after-school programming

[ ]  Produce is sent home with students

[ ]  Produce is sold on site (ex: student farmers market)

[ ]  Produce is donated

[ ]  N/A: school garden is a flower or pollinator garden (not for food)

* **Contact information:**
1. Primary Grant Administrator:

Name:

Title:

Email Address:

Phone Number:

1. Alternate Contact Information of Person Supporting the Grant:

Name:

Title:

Email Address:

Phone Number:

|  |
| --- |
| **Meal Site Information** |

**II. Meal Site Data for Schools and Early Education Programs (15 pts/10 pts for New Early Education Farm to School Initiatives)**

**This information should be completed or verified by your school food service director or CACFP operator.** The School District/Sponsor Agreement Number is a unique number provided by DESE to all sponsors of NSLP and/or CACFP. *Please note: the Department of Elementary and Secondary Education, Office of Food and Nutrition Programs will review the following data from the School/Site October 2023 Application and Claim: Site address, enrollment, and percent of students eligible for free and reduced priced meals.*

1. School District/Sponsor Agreement Number (DESE Child Nutrition Program Agreement Number):

Please fill out the table below that corresponds with the program scale you selected in Section I: Sponsor Information. You should only fill out one of the two tables that correctly corresponds with the scope of your project proposal.

**i. For single schools, collection of identified schools within a district, or single early education programs:**

Please complete the table below. If grant activities are school-specific within a district, please only list the schools receiving active programming paid for through your MA FRESH grant proposal. Please add rows to the table if additional site data should be provided.

|  |  |  |
| --- | --- | --- |
| *School/Program Site Name* | *Site Number* | *Meals offered on site (check all that apply):* |
|  |  | [ ]  Breakfast [ ]  Lunch [ ]  Snack [ ]  Supper [ ]  Summer Food Service Program (Summer EATS) |
|  |  | [ ]  Breakfast [ ]  Lunch [ ]  Snack [ ]  Supper [ ]  Summer Food Service Program (Summer EATS) |
|  |  | [ ]  Breakfast [ ]  Lunch [ ]  Snack [ ]  Supper [ ]  Summer Food Service Program (Summer EATS) |

**ii. For entire school district or an early education program or network with multiple facilities:**

Please complete the table below. *Please note: this table should be used only if project activities funding through MA FRESH are provided to all sites or programs within your district/network (this includes satellite locations, if applicable). Please be sure that the activities outlined in your project workplan table illustrate how all sites in your district/network will be served through your proposal.*

|  |  |  |  |
| --- | --- | --- | --- |
| *District/Program Name* | *Sponsor Agreement Number*  | *Total Number of Sites in Your District/Program* | *Percentage of Sites Within District/Program Participating in the Following Programs* |
|  |  |  | Breakfast:Lunch:Snack:Supper:Summer Food Service Program (Summer EATS): |

1. Please briefly describe your food service operations including: (a) management structure - self-operated, food service management company, vended, etc (b) participation percentages (c) preparation method -- heat and serve, cooking with unprocessed ingredients, a mix (d) service styles (e) program or menu highlights. Please indicate if your food service program currently utilizes unprocessed or minimally processed local foods or what steps have been taken to integrate local foods, where possible, in the current school year. (250 words max):

|  |
| --- |
| **Proposed Grant Activities** |

**III. Proposal**

1. **Title of Proposal:**
2. **Project Summary:** Please provide a 2-4 sentence summary of your proposed project*. Please note: should this proposal be awarded, DESE will use this descriptor publicly*:
3. **Project Description Highlighting New Activities (10 pts)**: Introduce your project. Please describe how the proposed project initiates new activities. These activities may build on existing programs, but must add distinct scope, capacity, offerings, etc. to your current initiatives. Applications may briefly summarize existing efforts related to MA FRESH activities, but the majority of your project description should explain what new or expanded initiatives the applicant seeks to accomplish and how those activities will be accomplished with the grant funds. *Strong applications will connect food system education to the availability of nutritious, unprocessed, or minimally processed local ingredients served in school or early education meal programs* (250 words max).
4. **Goals (10 pts)**: Clearly outline up to three goals you plan to accomplish during the grant period.
*[Ex: Goal #1 - Increase student exposure to and acceptance of healthy local foods by 50 percent.]*

**Goals #1:**

**Goals #2:**

**Goals #3:**

1. **Project Workplan (20 pts):** For each goal listed, complete the table provided to illustrate the activities, responsible individual(s), timeline to reach that goal and anticipated quantitative impact. Please complete for each goal and add additional rows in the timeline as needed to describe all relevant activities over the grant period.

For workplan reference:

* **Activities** refer to the specific activities that will be conducted to accomplish this goal.
* **Target Audience** refers to the main audience the described activity will serve (*such examples may include, but are not limited to: students, food service professionals, teachers, farmers, etc*)
* **Indicator** refers to the indicator of success the applicant will use to measure progress *(such examples may include, but are not limited to: the number of individuals impacted, the number of trainings conducted, the number of materials created, the number of meals served, etc)*
* **Target** refers to the quantitative target number the applicant plans to accomplish that directly corresponds with the indicator provided *(such examples may include, but are not limited to: Indicator – Number of Trainings Hosted, Target – 4; Indicator – Number of Student Participants; Target – 30).* The target should be a numerical value that represents the total impact across the entire grant period for the described activity.
* **Anticipated Start Date** refers to the month and year the work plan activity will begin, not to proceed January 1, 2024. *Please note: start date is subject to change and may be later than January 1, 2024.*
* **Anticipated Completion Date** refers to the month and year the work plan activity will begin, not to exceed June 30, 2025.
* **Responsible Party** refers to the individual or individuals who will take a lead on ensuring the activity will be accomplished.

|  |
| --- |
| **Project Workplan** |
| Goal #1: *[Ex: Increase student exposure to and acceptance of healthy local foods by 50 percent.]* |
| **Activities** | **Target Audience** | **Indicator** | **Target**  | **Anticipated Start Date (Month, Year)** | **Anticipated Completion Date (Month, Year)** | **Responsible Party** |
| *Ex: Host one Harvest of the Month cafeteria taste test at 4 Elementary Schools per month for four months* | *Students* | *Number of Students Offered a Taste Test* | *4,000* | *February 2024* | *June 2024* | *Sam Cooke, Manager, Food Service Department* |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Goal 2: [Insert Goal #2] |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Goal 3: [Insert Goal #3] |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

1. **Project Impact (10 pts; 5 pts for New Early Education Farm to School Initiatives):**
2. Share your anticipated project impact, expanding on specific, quantitative outcomes. How will the implementation of this grant impact your students, staff and school community? How do your proposed activities support the grant project goals of “farming reinforcing education and student health”? (250 word max)
3. **Personnel: List any key school/program staff managing project activities (5 pts).** Provide their name, title, and brief description of their role. Describe the experience they bring to this position. Please add additional personnel lines as needed.

Name:

Title:

Brief description of role:

Experience they bring to this position:

Name:

Title:

Brief description of role:

Experience they bring to this position:

1. **External Collaborators (10 pts):** Attach a letter of support from any contracted partner that will be involved in the project. If activities in your proposal will be completed by a partner organization, food producer or another external collaborator, please describe their role and experience. Please add additional external collaborator lines as needed.

External Partner Name:

Contact Person Name:

Contact Person’s Title:

Brief description of their role in the grant:

Experience they bring that will help accomplish the grant goals:

**IV. Budget/Budget Narrative (20 pts)**: Projects may last up to 18 months. Complete the attached budget template separately for each fiscal year (Fiscal year 1: through June 30, 2024 and fiscal year two: July 1, 2024 through June 30, 2025) for all activities. Please be sure to budget separately for each fiscal year.

1. Please provide a brief budget narrative below to explain the estimated costs in the budget. Proper budget narratives should explain how the costs associated with each line item or category relate to the implementation of the project as outlined in the proposal being submitted (150 word max).

**V. Signatures**

We have reviewed this application and attest to the information provided. If selected, we agree to implement the project as outlined above and to implement the project in a manner consistent with the policies and the procedures established by DESE.

1. We attest that the School District/Sponsoring Organization is in good standing with the Child Nutrition Program requirements.
2. We agree to participate in any DESE sponsored evaluations, reporting requirements, and to provide the information requested by the specified deadlines.

Please provide the contacts shown below or equivalent positions as determined by the School District / Sponsoring Organization. *Please* *note: in some cases, position responsibilities below may be filled by the same individual. In this case, duplicated signatures are permitted.*

Food Service Director/CACFP Program Operator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_

Grant Administration Lead: \_Date: \_\_\_\_\_\_\_

Superintendent or Executive Director: Date: \_\_\_\_\_\_\_

1. There is no Federal or State definition of “local.” Each School Food Authority or operator is encouraged to create a definition for local that works for their particular needs and goals. As a starting place, the recent Northeast Food for Schools USDA funded, MA executed program defined local as anything that was grown, raised, or caught within 400 miles of the School Food Authority. [↑](#footnote-ref-1)