



CACFP

CHILD & ADULT CARE FOOD PROGRAM

New Jersey Department of Agriculture Division of Food And Nutrition

APPLICATION PACKAGE

Adult Day Care Center
At-Risk Afterschool Meals Program
Child Care Center Emergency
Shelter Program Family Day
Care Program Outside School
Hours Program



New Jersey Department of Agriculture
Division of Food and Nutrition
Child and Adult Care Food Program
22 S. Clinton Avenue, Bldg. 4, 3rd Flr.
Trenton, NJ 08609-1212
609-984-1250

Child and Adult Care Food Program New Institution Application Procedures

1. Follow instructions on the New Institution CACFP Outreach email and obtain NJSTART Vendor Registration and Vendor ID Number, DUNS Number, and SAM Registration (see pages 3- 6).
2. Complete and email New Sponsor Information Form Part A-D (pages 7-10) to your CACFP County Specialist (see page 11 for Specialist by County email address listing).
3. Receive New Institution Training Invitation email and register online for training.
4. Attend (3)-Day New Institution Training and receive Training Certificate.
5. Review Application Package procedures and complete all required application documents.
6. Mail all completed application documents listed on page 13 to:

New Jersey Department of Agriculture
Division of Food and Nutrition
Child and Adult Care Food Program
Attention: Stephanie Sutton-Page
P.O. Box 334
Trenton, NJ 08625-0334

Once all completed application documents are received at the New Jersey Department of Agriculture (NJDA) CACFP office, your application will be reviewed to ensure all required documents have been included. If NJDA has not received all required documents, your application will be returned for corrections.

Once all documents are received, reviewed, and approved, NJDA CACFP will e-mail your assigned Agreement Number, CARES System User Log in Self-Registration link and User Log In Authorization forms to your designated CACFP Responsible Representative.

7. Once your designated Submitter and Certifier User Authorization forms are emailed to NJCARES@ag.nj.gov, your users will be approved and activated. (Emailed from CACFP Responsible email address). You will use the log in created to access the CARES system.
8. At this time, you should go to nj.gov and log in to gain access to the CACFP CARES online system and begin to enter all information regarding your institution. After completion, the information will again be reviewed and approved so you can begin the program. However, you may not begin the program until you receive final approval from the CACFP.
9. Receive CACFP online application approval within 90 days.
10. Once approval is granted, begin submitting CARES system claims and receive CACFP reimbursement.

CACFP PRE-APPLICATION REQUIREMENTS:

STATE OF NEW JERSEY NJSTART Vendor Registration Process

Child and Adult Care Food Program

NJSTART Vendor Registration Instructions (including electronic funds transfer)

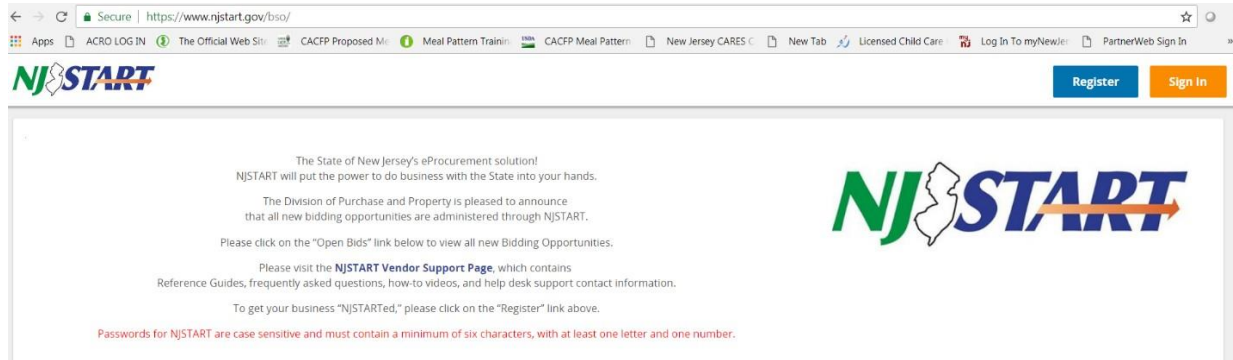
Any institution that receives payment from the State of New Jersey must have a "NJSTART VENDOR REGISTRATION AND ID NUMBER." If you do not have a NJSTART VENDOR ID NUMBER, below are the instructions on how to obtain your VENDOR ID NUMBER.

1. Go to the vendor registration website: www.njstart.gov (see page 4).
2. Click on the registration link.
3. Complete the required online information.
4. For assistance completing, go to NJSTART Quick Reference Guide at:
<https://www.state.nj.us/treasury/purchase/njstart/pdf/QRG-Vendor-Registration.pdf>
5. Once you obtain this number, insert the number onto the *New Sponsor Information Form* in the CACFP Application Packet. This number is **REQUIRED** before submitting the CACFP Application Package.
7. If your CACFP Application Package is received without the Vendor ID Number, it will be returned to you for completion.

Please call the State Vendor Administrator for assistance at 609-341-3500, if you have problems obtaining a NJSTART Registration or Vendor ID Number.

To begin the CACFP online application approval process, you will need to obtain the following in order to start your online application to be approved to participate in CACFP:

1. NJSTART Vendor Registration: <https://www.njstart.gov/bsa/>



**Child and Adult Care Food Program (CACFP)
DUNS Number Acquisition
and
System Award Management (SAM) Registration**

The USDA Child and Adult Care Food Program is funded by federal taxes. It is becoming more common for the public to want to know where and how this money is being spent. Part of the information required by the federal government is that each CACFP Sponsoring Institution must have an ID through the DUN and Bradstreet Universal Numbering System (DUNS).

As a result, the New Jersey Department of Agriculture (NJDA), Division of Food and Nutrition (DFN), must require institutions applying for the Child and Adult Care Food Program (CACFP) to acquire a DUNS number so that this information may be displayed to the public via the website USAspending.gov. An annual SAM registration renewal is also required.

Therefore, the following requirements are required for application approval for your Child and Adult Care Food Program. **Please complete the following to obtain your DUNS and SAM Registration:**

1. Go to: <http://fedgov.dnb.com/webform> to acquire your DUNS number. It takes 1-2 business days to obtain a DUNS. This is free! (See page 6)
2. Once receiving your DUNS number, go to www.sam.gov. This is free! **Note:** If you need assistance with the SAM site, go to the SAM Help Desk at: www.fsd.gov
3. Create a Personal Account and Login
4. Click "Register New Entity" under "Manage Entity" on your "My SAM" page
5. Select your type of Entity
6. Select "No" to "Do you wish to bid on contracts?"
7. Select "Yes" to "Do you want to be eligible for grants and other federal assistance?"
8. Complete "Core Data"
 - ✓ Validate your DUNS information
 - ✓ Enter Business Information (TIN, etc.)
 - ✓ Enter CAGE code if you have one. If not, one will be assigned to you after your registration is completed. Enter General Information (business types, organization structure, etc.)
 - ✓ Enter your Financial Information (Electronic Funds Transfer (EFT) Information)
 - ✓ Enter Executive Compensation, if applicable
 - ✓ Enter Proceedings Details
9. Complete "Points of Contact"
10. Your entity registration will become active after 3-5 days when the IRS validates your TIN information.
11. **Once the IRS validates your information by an e-mail notification, you will be required to input the DUNS number and SAM Registration expiration on page 8.**

*****Please ensure your SAM Registration is available for public search.**

*****Reimbursement will not be granted without a "current and active" SAM registration.**

2. DUNS Number for your Institution: <http://fedgov.dnb.com/webform>



"NOTICE" Apple Developer Program use <https://developer.apple.com/enroll/duns-lookup/#search> and for FDA please use <https://www.fda.gov/downloads/ForIndustry/ImportProgram/EntryProcess/ImportSystems/UCM483657.pdf> *NOTICE**PLEASE USE IE AND ENABLE JAVASCRIPT WHEN USING WEBFORM

- Begin D-U-N-S Search/ Request Process
- About the D&B D-U-N-S Number
- Frequently Asked Questions (FAQ)
- D&B, SAM, Grants Contacts
- D&B's Privacy and Data Policy
- Accessibility

Welcome to the D&B D-U-N-S Request Service for US Federal Government Contractors and Assistance Awardees

Dun & Bradstreet (D&B) provides a D-U-N-S Number, a unique nine digit identification number, for each physical location of your business.

D-U-N-S Number assignment is FREE for all businesses required to register with the US Federal government for contracts or grants.

Click here to request your D-U-N-S Number via the Web. If one does not exist for your business location, it can be created within 1 business day.

For technical difficulties, contact SAMHelp@dnb.com

Spam-blockers and other security features on your computer or network could block our email responses which may include your DUNS Number. Please ensure that you are able to receive emails from SAMHelp@dnb.com. Adding SAMHelp@dnb.com to your address book may help prevent our emails from being inadvertently blocked.

3. System Award Management (SAM) Registration: <https://sam.gov/portal/SAM/#11>

The screenshot shows the SAM.gov website interface. At the top, there is a navigation bar with the SAM logo and a "Log In" button. Below the navigation bar, there is a "HOME" link and a "SEARCH RECORDS" link. A red alert banner is visible, stating: "ALERT - June 11, 2018: Entities registering in SAM must submit a notarized letter appointing their authorized Entity Administrator. Read our updated FAQs to learn more about changes to the notarized letter review process and other system improvements." Below the alert, there is a section titled "Getting Started" with three main options: "Create A User Account", "Register Entity", and "Search Records". Each option has a corresponding icon and a brief description of the process.

**Child and Adult Care Food Program
New Sponsor Information Form-
Part A**

Please email completed form and copies of your 501(c)3 or Certificate of Formation\Incorporation, with IRS Letter of Determination, and all facility license(s) to your County CACFP Specialist (see page 11 for Specialist email address).

Contact Person _____ E-mail Address _____

Institution Legal Name _____

Federal Identification Number _____ Telephone Number/Ext _____

Cell Number _____ FAX Number _____

Legal Address _____

Mailing Address (if different) _____

City _____ State ____ Zip Code/Ext ____ - ____ County _____

NJStart Vendor ID Number _____ DUNS # _____

SAM Registration Expiration Date ____ / ____ / ____

Non-Profit Institution

Executive Director's Name _____ Birth Date _____

For-Profit Institution

Owner's Name _____ Birth Date _____

Owner's Name _____ Birth Date _____

Is this a Multi-state institution (Operates the CACFP in more than one state besides New Jersey)? Circle: Yes or No

If yes, list the affiliated or unaffiliated facilities under this multi-state sponsoring organization and the state(s) in which they operate:

Child and Adult Care Food Program

Is this institution a Multi-purpose organization (i.e. does the sponsor only operate CACFP, or is it part of a larger organization with other activities, such as Resource and Referral services, or programs such as Head Start, The Emergency Food Assistance Program (TEFAP), National School Lunch Program (NSLP), or the Summer Food Service Program (SFSP), etc.?

Circle: Yes or No

If yes, list the other programs you currently administer:

Institution Type / Tax- Exempt Status:

(Please check) Non-Profit For-Profit Government

Type of Facility:

(Please check) Child Care Adult Day Care At-Risk Afterschool Meals
 Emergency Shelter Outside School Hours
 Family Day Care Sponsoring Organization

Have you ever participated in a Child Nutrition Program as an Institution or Facility?

Circle: Yes or No

If yes, list the other programs you currently administer (i.e. CACFP, SFSP, NSLP, etc.):

Number of Facilities(s) _____ Number of Participants _____

List all Facility Names	Director's Name	Date of Birth

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New Sponsor Information Form – Part D

CACFP Responsible Person (Program Operations):

Last Name _____ First Name _____
Title _____ Email _____
Phone _____ Alternate Phone _____
Fax _____

CACFP Representative completing the Application:

Last Name _____ First Name _____
Title _____ Email _____
Phone _____ Alternate Phone _____
Fax _____

CACFP Representative Submitting Claims:

Last Name _____ First Name _____
Title _____ Email _____
Phone _____ Alternate Phone _____
Fax _____

CACFP Representative Certifying Claims:

Last Name _____ First Name _____
Title _____ Email _____
Phone _____ Alternate Phone _____
Fax _____

NJDA Use Only:

Specialist\Coordinator Approval _____ / _____ Date Training Date _____

Agreement Number: _____ NDL Verification _____

Child and Adult Care Food Program

CHILD AND ADULT CARE FOOD PROGRAM COUNTY ASSIGNMENTS AND CODES
 NEW JERSEY DEPARTMENT OF AGRICULTURE
 DIVISION OF FOOD AND NUTRITION
 P.O. Box 334
 Trenton, New Jersey 08625-0334

CACFP (609)984-1250 FAX (609)984-0878

COORDINATOR: STEPHANIE SUTTON-PAGE
 ASSISTANT COORDINATORS - DR. CARRIE FREEMAN-WRIGHT & LAURA INSLEY

ESTHER IHEKUNA			MICHAEL SMITH			JUSTIN BLAKE			KRISTEN LENTO			STEVEN KRAEMER		
CCFP Code	AFP Code	County	CCFP Code	AFP Code	County	CCFP Code	AFP Code	County	CCFP Code	AFP Code	County	CCFP Code	AFP Code	County
03	04	BERGEN	01	02	ATLANTIC	09	10	CAPE MAY	05	06	BURLINGTON	01	02	ATLANTIC
						11	12	CUMBERLAND				07	08	CAMDEN
07	08	CAMDEN	25	26	MONMOUTH	17	18	HUDSON	21	22	MERCER	09	10	CAPE MAY
												11	12	CUMBERLAND
13	14	ESSEX	27	28	MORRIS	19	20	HUNTERDON	23	24	MIDDLESEX	13	14	ESSEX
												15	16	GLoucester
15	16	GLoucester	29	30	OCEAN	41	42	WARREN	33	34	SALEM	17	18	HUDSON
			31	32	PASSAIC				35	36	SOMERSET	21	22	MERCER
			37	38	SUSSEX				39	40	UNION	23	24	MIDDLESEX
												25	26	MONMOUTH
												31	32	PASSAIC
												39	40	UNION

REMINDER: In order to better assist you, please have your Institution Name and Agreement# available when calling or corresponding with our office.

CCFP - Child Care Food Program
 AFP - Adult Food Program

NJDA CACFP SPECIALIST EMAIL ADDRESSES:

Justin.Blake@ag.nj.gov

Esther.Ihekuna@ag.nj.gov

Steven.Kraemer@ag.nj.gov

Kristen.Lento@ag.nj.gov

Michael.Smith@ag.nj.gov

NJCARES HELP DESK:

NJCARES@ag.nj.gov

Child and Adult Care Food Program

New Institution Application Training Requirement

7 CFR §226, which is the federal regulations governing the Child and Adult Care Food Program (CACFP), require institutions desiring to participate in the CACFP to complete training before they can be approved. In order to meet this requirement and during the process of applying for the CACFP, Institution Representatives must complete the CACFP 3-day New Institution Training, which explains the basic requirements of the program.

This Introduction to the Child and Adult Care Food Program, has been divided into three training sessions that address specific responsibilities of the institution, hereinafter referred to as sponsor.

After completing all three days of training, you will receive a certificate. A copy of this certificate must be included with your application package. The original date you completed the course will be listed on the certificate(s). Sponsors must successfully complete all three sessions and receive application approval within a **three-month period**. If your application has not been approved and training has not completed within the three-month period, the certificates will expire and the three-day training sessions will have to be taken again before a sponsor, and the application can be approved for the New Institution to participate in the CACFP.

We recommend that the person assigned to the specific CACFP responsibilities be the individual assigned to completing the three-day training. You may register two representatives for these required trainings. For example, the staff responsible for developing the menu and ensuring that all meals comply with meal pattern regulations should attend the meal pattern training on day two. NJDA strongly recommends that the recordkeeping and reimbursement claim session on day three be completed by the sponsor's accountant, financial officer, or fiscal staff.

Since all sponsors are required to comply with all regulations, the person(s) responsible for the institution (i.e. department heads, executive directors, and president of the boards of non-profit agencies; and the owners and CACFP contact of proprietary/for-profit centers) **must** attend the entire training series, as they are ultimately responsible for the overall management of the CACFP.

Child and Adult Care Food Program

Mail all completed application documents to:

New Jersey Department of Agriculture
Division of Food and Nutrition
Child and Adult Care Food Program
Attention: Stephanie Sutton-Page
P.O. Box 334
Trenton, NJ 08625-0334

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Once all documents are received, reviewed, and approved, NJDA CACFP will e-mail your assigned Agreement Number, CARES System User Log in Self-Registration link and User Log In Authorization forms to your designated CACFP Responsible Representative.

Complete required forms downloaded from NJDA CACFP Website:
(<https://www.nj.gov/agriculture/divisions/fn/childadult/food.html>)

CACFP CARES Application Document Uploads and Document Submission Checklist – Requires Preapproval

- # 9 501 (c) 3 Tax Exempt Status – Non-Profit only (Submitted with New Form – Part A-D)
- # 10 Disclosure of Ownership and Certificate of Incorporation– For-Profit only (Submitted with New Form – Part A-D)
- # 11 Sponsoring Organization Letter
- # 12 W-9 Form/NJ Start
- # 13 ACH Electronic Funds Transfer – NOT Required\Blank Document
- # 14 Outside Employment Policy
- # 15 Monitoring Schedule
- # 16 Current Completed Monitoring Form
- # 17 Job Descriptions for CACFP (Monitor)
- # 18 Small Purchase Contract
- # 19 Food Service Management
- # 20 Sanitation Certification of Food Service Management Company
- # 21 Sample Daily Dated Menu with Agency Name
- All Participants Eligibility Applications
- All Facility Eligibility Records – Listed by Facility Name
- Sample Individual Plan of Care – Adult Care only
- Structured, comprehensive health program, social & related support services brochure – Adult Care only
- CACFP New Institution Training Certificate
- Required News Release
- Preapproval Form for Each Facility
- License for Each Facility
- Procurement Standards – Signed
- Procurement Plan
- Procurement Standards Code of Conduct
- Unaffiliated Facility 501c3 or Certificate of Formation
- Sponsor-Center Agreement
- Sanitation Certification for all Facilities
- At-Risk Facility – Fire Certificate, Certificate of Occupancy

Child and Adult Care Food Program

CACFP CARES APPLICATION CHECKLIST

You will receive CACFP CARES User Guide and Application Webinar for assistance in completing the online application, once application documents have been submitted and approved.

Enter information for checklist items 1-8 and Facility Maintenance page. Upload approved application documents for checklist items 9-21. Check completed, if items 22 and 23 were submitted and approved.

Item Description	Started	Completed by Entity	Approved By NPS	Additional Info Requested
On-Line Documents				
1. Institution Management Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
2. Responsible Parties/Principals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
3. Application Questionnaire - (Program Integrity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
4. Institution Administrative Budget (Please complete a facility maintenance form for each sponsored facility before completing this form.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
5. Pre-Award Civil Rights Questionnaire (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
6. News Release (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
7. Permanent Agreement (includes policy statement) (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
8. Application for Center Facility Participation	<input type="checkbox"/>	<input type="checkbox"/> 0 of 1	<input type="checkbox"/>	<input type="checkbox"/> Details
Comments				
EMail text <input type="text"/> <input type="button" value="EMail"/>				
Institution Document Uploads				
<input type="button" value="Upload or View Uploaded Documents"/>	Uploaded	Completed	Approved By NPS	Additional Info Requested
9. 501(c)(3) Tax Exempt Status (Not for Profit New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
10. Disclosure of Ownership and Certificate of Incorporation (New Proprietary Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
11. Sponsoring Organization Letter (If Institution Name is different than Legal Name)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
12. W-9 Form (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
13. ACH Electronic Funds Transfer (Bank Information) (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
14. Outside Employment Policy (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
15. Monitoring Schedule for this fiscal year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
16. Current Completed Monitoring Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
17. Job Descriptions for CACFP Staff (New or Modified CACFP Job Positions/Descriptions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
18. Small Purchase Contract (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
19. Food Service Management Company Contract (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
20. Sanitation Certificate of Food Service Management Company (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
21. Sample Daily Dated Menu with Agency Name (New Institutions Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
Independent Center Paper Only Documents (Submitted by Hard Copy)				
22. Eligibility Applications & Enrollment Records (New Institutions Only)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
23. Proprietary Institutions Only a. Proprietary Cert. Letter (25% Eligibility) b. Purchase of Care Documentation, OR c. Free/Reduced Eligibility Documentation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Details
Training Status	No Training Records		<input type="checkbox"/>	<input type="checkbox"/> Details