

**Summer Food Service Program  
Summer 2025 Child Nutrition Programs 12(l) Waiver Checklist**

Child Nutrition Programs are expected to be administered according to all statutory and regulatory requirements; waivers to the requirements are exceptions. However, Section 12(l) of the Richard B. Russell National School Lunch Act (NSLA), 42 U.S.C. 1760(l), provides USDA authority to waive requirements for State agencies or eligible service providers under certain circumstances.

This optional form is designed to streamline the process for State agencies requesting a waiver of statutory or regulatory requirements for the Summer Food Service Program (SFSP) and National School Lunch Program Seamless Summer Option (SSO) for 2025 summer operations (May 1, 2025 – September 30, 2025). The form does not allow States to modify their request to waive additional regulations for those waiver types or to submit other types of waivers.

SFSP and SSO operators may not use this form to submit waivers for their own operation. Operators that wish to apply for a waiver separately from a statewide waiver must contact the State agency and provide them with the necessary information to complete the waiver request on their behalf, including the required elements in [SP 15-2018](#), [CACFP 12-2018](#), [SFSP 05-2018](#), *Child Nutrition Program Waiver Request Guidance and Protocol* - Revised, May 24, 2018.

As with any waiver request, State agencies using this form must provide notice and information to the public about their application for a waiver in accordance with the requirements at Section 12(l) of the NSLA.

**1. State agency submitting waiver request and responsible State agency staff contact information:**

**State Agency:**

**Date (click on box to select date):**

**Physical Address:**

**Name of person completing this form:**

**Title of person completing this form:**

**2. Region (click on box to select region):**

**3. Affirmation that eligible service providers participating in the waiver(s) are in good standing:**

**Please check one:**      **Yes**              **No**

**If No, please explain:**

**Waivers Related to Excessive Heat:**

The waivers in this section allow State agencies to approve SFSP and SSO sponsors, in good standing, to operate **outdoor** meal sites without temperature-controlled alternative sites as non-congregate sites on days when the National Weather Service (NWS) has issued a Heat Advisory, an Excessive Heat Warning, or an Excessive Heat Watch for the area where the site is located. These waivers are effective *May 1, 2024, through September 30, 2024.\**

**Non-Congregate Meal Service:** [42 U.S.C. 1753(b)(1)(A), 42 U.S.C. 1761(a)(1)(D), and 7 CFR 225.6(i)(15)], meals must be served in a congregate setting and must be consumed by participants on site.

**Meal Service Times:** [7 CFR 225.16(c)(1), (2), and (3)], Meals must follow meal service time requirements.

**Parent or Guardian Meal Pickup:** 42 U.S.C. 1761(f)(3), 7 CFR 225.2 (Meals), and 7 CFR 225.9(d)(7)], meals must be served to eligible children.

**1. To use the meal service times waiver, sponsors may not change meal service times less than 24 hours in advance of the previously scheduled meal service time. In addition, sponsors must post a printed notice at the site informing participants of the change; notify the community through appropriate channels, such as a school or neighborhood listservs; and comply with any additional requirement(s) set by the state agency. Do you acknowledge the limitations of the meal service times waiver outlined in this section?**

Yes

No

**If No, please explain:**

**2. What challenges would Program sponsors face without these waivers? Choose all that apply.**

Increased Program costs

Increased food waste

Reduced participation

Exposure of participating children to excessive heat

Negative Impact on the ability to meet the needs of children and at-risk youth

Other, describe:

**3. How would these waivers benefit Program sponsors? Choose all that apply.**

Control costs

Reduce food waste

Maintain program participation

Limit exposure of participating children to excessive heat

Allow sponsors to schedule meal service times that accommodate the needs of the community

Other, describe:

**4. Describe the program procedures that will be in place under these waivers, if approved. Explain how these waivers will affect program operations (e.g., technology, automated systems, and monitoring) and how program integrity will be maintained.**

**5. Are there any anticipated challenges that the State agency or eligible service providers may face with implementation of these waivers?**

No anticipated challenges

Other, describe:

**6. What steps will the State agency take to successfully implement these waivers?**

Training

Monitoring

Other, describe:

**7. Proposed monitoring and review procedures:**

**8. Provide a link to the public notice about the requested Excessive Heat Waiver. If no link is available, please email a copy of the notice to your Regional Office.**

**Waivers Related to Air Quality Advisories:**

The waivers in this section allow State agencies to approve SFSP and SSO sponsors, in good standing, to operate **outdoor** meal sites without alternative indoor sites as non-congregate sites on days when the area is experiencing an Air Quality Index (AQI) that reaches a “purple” flag level or higher, as indicated at <https://www.airnow.gov/>. These waivers are effective *May 1, 2025, through September 30, 2025.\**

**Non-Congregate Meal Service:** [42 U.S.C. 1753(b)(1)(A), 42 U.S.C. 1761(a)(1)(D), and 7 CFR 225.6(i)(15)], meals must be served in a congregate setting and must be consumed by participants on site.

**Meal Service Times:** [7 CFR 225.16(c)(1), (2), and (3)], meals must follow meal service time requirements.

**Parent or Guardian Meal Pickup:** [42 U.S.C. 1761(f)(3), 7 CFR 225.2 (Meals), and 7 CFR 225.9(d)(7)], meals must be served to eligible children.

**1. To use the meal service times waiver, sponsors may not change meal service times less than 24 hours in advance of the previously scheduled meal service time. In addition, sponsors must post a printed notice at the site informing participants of the change; notify the community through appropriate channels, such as a school or neighborhood listservs; and comply with any additional requirement(s) set by the state agency. Do you acknowledge the limitations of the meal service times waiver outlined in this section?**

Yes

No

**If No, please explain**

**2. What challenges would Program sponsors face without these waivers? Choose all that apply.**

Increased costs

Increased food waste

Reduced participation

Exposure of participating children to hazardous air quality

Negative Impact on the ability to meet the needs of children and at-risk youth

Other, describe:

**3. How would these waivers benefit Program sponsors? Choose all that apply.**

Control costs

Reduce food waste

Maintain program participation

Limit exposure of participating children to hazardous air quality

Allow sponsors to schedule meal service times that accommodate the needs of the community

Other, describe:

**4. Describe the program procedures that will be in place under these waivers, if approved. Explain how these waivers will affect program operations (e.g., technology, automated systems, and monitoring) and how program integrity will be maintained.**

**5. Are there any anticipated challenges that State or eligible service providers may face with implementation of these waivers?**

No anticipated challenges

Other, describe:

**6. What steps will the State agency take to successfully implement these waivers?**

Training

Monitoring

Other, describe:

**7. Proposed monitoring and review procedures:**

**8. Provide a link to the public notice about the requested Air Quality Waiver. If no link is available, please email a copy of the notice to your Regional Office.**

**Offer Versus Serve:**

The waiver in this section allows State agencies to approve non-school food authority (SFA) SFSP sponsors, in good standing, to use SFSP offer versus serve meal service parameters on a case-by-case basis. This waiver is effective *May 1, 2025, through September 30, 2025.\**

**Offer Versus Serve:** [42 U.S.C. 1761(f)(7) and 7 CFR 225.16(f)(1)(ii)]

**1. This waiver is only allowed at sites operating congregate meal service. Do you acknowledge that this waiver is only for sites operating congregate meal service?**

Yes

No

**2. What challenges would Program sponsors face without these waivers? Choose all that apply.**

Increased Program costs

Increased food waste

Decreased participant meal satisfaction

Other, describe:

**3. How would these waivers benefit Program sponsors? Choose all that apply.**

Control costs

Reduce food waste

Improve meal satisfaction which increases Program participation

Other, describe:

**4. Describe the program procedures that will be in place under this waiver, if approved. Explain how this waiver will affect program operations (e.g., technology, automated systems, and monitoring) and how program integrity will be maintained.**

**5. Are there any anticipated challenges that State or eligible service providers may face with implementation of this waiver?**

No anticipated challenges

Other, describe:

**6. What steps will the State agency take to successfully implement these waivers?**

Training

Monitoring

Other, describe:

**7. Proposed monitoring and review procedures:**

**8. Provide a link to the public notice about the requested Offer Versus Serve Waiver. If no link is available, please email a copy of the notice to your Regional Office.**

**\*The dates listed in italics align with the summer operational period; however, the actual duration of these flexibilities may vary based on the waiver approval date.**

---

**By providing a signature, I certify that the following is true and accurate:**

- These waivers will not increase the overall costs of the program to the Federal Government, or if there are anticipated increases, the costs will be paid from non-Federal funds.
- My State agency will comply with FNS waiver data reporting requirements, and any additional requirements that will be contained in my waiver approval letter.

Signature:

Title:

Requesting official's email address for transmission of response:



**TO BE COMPLETED BY FNS REGIONAL OFFICE:**

FNS Regional Offices are requested to ensure the questions have been adequately addressed by the State agency and formulate an opinion and justification for a response to the waiver request based on their knowledge, experience and work with the State.

**Date request was received at Regional Office (click on box to select date):**

Check this box to confirm that the State agency has provided public notice in accordance with Section 12(l)(1)(A)(ii) of the NSLA.

**Regional Office analysis and recommendations:**

**Signature of FNS Regional Office Reviewer:**