## Sponsors- Community Eligibility Provision (CEP) only Completing FNS 742 – Verification Collection Report

Submit one FNS-742 report per sponsor annually by February 1. The report is in CNPweb, on the *Claims* tab, click on "Add" under *Action* to open the report.

If the completed *FNS 742 Verification Collection Report* is not submitted in **CNPweb annually by February 2**, *Claims for Reimbursement* will be withheld until it is completed.

Sponsor Summ	ary					
Packet	Applications	Activity	CI	aims	Payments	Users
Claim N	Month		Revision	Status	Claim Amount	Action
	Form Name	F	Revision	Status	Date Approved	Action
FNS 742-Verification	on Collection Bonort		٥	Approved	12/24/2018	View Revise

Sponsor contact information is prepopulated..

		201	9-2020 Program Year Approved Revision 0
↓ Bottom of Form			
State Agency Name: Oregon Department of Education SFA Name:	SFA ID#:	Type of SFA:  ☑ Public ☐ Nonprofit/Private  SFA City:	School Year: From 2019 To: 2020 SFA Zip Code: 97071

1-1 #1 Column A & B as of the last operating day in October.

Section 1 Total Schools, Residential Child Care Institutions (RCCIs) and Enrolled Students				
**All SFAs must report section 1**	A. Number of schools OR Institutions	B. Number of Students		
(1) 1-1: Total Schools (Do not include RCCIs):	13	5666		
(2) 1-2: Total RCCIs (Do not include schools counted in 1-1):				
(3) 1-2a: RCCIs with day students (Report ONLY <u>day</u> students in 1-2aB):				
(4) 1-2b: RCCIs with NO day students:				

Complete Section 2 -3 with the same numbers recorded in Section 1-1A and B:

Section 2 SFAs with schools operating alternate provisions					
**ONLY SFAs with alternate provisions must report section 2**	A. Number of schools AND Institutions	B. Number of Students			
2-1: Operating Provision 2/3 in a BASE year for NSLP and SBP:					
2-2: Operating Provision 2/3 in a NON BASE year for NSLP and SBP:					
(7) 2-2a: Provision 2/3 students reported as FREE in a NON BASE year:					
(8) 2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:					
(9) 2-3: Operating the Community Eligibility Option:	13	5666			
(10) 2-4: Operating other alternatives for NSLP and SBP:					
2-5: Operating an alternate provision(s) for only SBP or only NSLP:					

## 3-1 #12 Check the box, the rest of the section is not applicable and will be grayed out.

Section 3 Students approved as FREE eligible NOT subject to verification	
**All SFAs must report Section 3 or check box 3-1 if applicable**  3-1 Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP (i.e. NON BASE year Provision 2/3 for all schools)	Number of FREE Students
(13) 3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP): Do <u>not</u> include students certified with SNAP through the letter method.	
<ul> <li>3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on (14) Indian Reservations (FDPIR), or Medicaid (if applicable); those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.</li> </ul>	
3-4: Students certified categorically FREE eligible through SNAP letter method: (15) Include students certified for free meals through the family providing a letter from the SNAF agency.	
51 Check the box	
Section 5  **ALL SFAs must report Section 5 or check box 5-1 if applicable**  5-1:  Check the box if ALL schools and/or RCCIs are exempt from verification (see instruent exemptions). If 5-1 is checked, no further reporting in Section 5 is required.	
VC-1 Enter N/A if no applications were verified for cause.	
VC-1: Total questionable applications verified for cause (Enter "N/A" if not applicable):  (42) Report the number of applications as of November 15th verified for cause in addition to the verification requirement.	N/A
Scroll to the bottom and check I certify box #43, then click "Submit."	
✓ I Certify that the information submitted for the FNS 742-Verification Collection Report is (43) I am aware that deliberate misrepresentation or withholding of verification information may prosecution under applicable State and Federal statutes. I certify that records are available Verification Collection Report data.	result in
↑Top of Form	
Submit Cancel	