North Carolina Department of Health and Human Services Division of Public Health Women's & Children's Health Section Nutrition Services Branch Special Nutrition Programs CHILD AND ADULT CARE FOOD PROGRAM

Participant Information for New Centers Summary: At-Risk Afterschool Meals Programs

NAME OF INSTITUTION:

#	Name of Center	Previously Operated in Summer Food Service Program (Check if Yes) √	Total Number of Participants

The representations made herein on behalf of the Institution are true and correct to the best of my knowledge. I understand that these representations are being made in connection with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.

Signature of Institution's Authorized Representative

____/ Date

Participant Information: At-Risk Afterschool Meals Nutrition Services (NSB 05/19)