

Issue Paper

DATE:

August 2, 2021

AGENDA ITEM (ACTION ITEM):

Consider/Approve Summit View Academy Child Care Food Program Meal Service Agreement with Children's Inc. for the 2021-2022 school year.

APPLICABLE BOARD POLICY:

Legal Status of the Board 01.1

HISTORY/BACKGROUND:

Summit View Student Nutrition will provide milk each school day to students enrolled in Children's Inc. Per agreement terms, Children's Inc will pay \$.50 per milk.

FISCAL/BUDGETARY IMPACT:

None.

RECOMMENDATION:

Approval to execute the Summit View Academy School Child Care Food Program Meal Service Agreement with Children's Inc. for the 2021-2022 school year.

CONTACT PERSON:

Elizabeth Hord

incipal/Administrator District Administrator

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.

Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

Child Care Food Program Meal Service Agreement With District School Board/School Food Service

Contact Person: Debra Watson			Phone No. 859-431-2075 Ext, 218			
Address: 333 M	adison Avenue					
Coving	gton, Kentucky 41	L 01 7				
to June 1st, 2022 exce	ept for holidays or oth	e agrees to furnish meals ner days of in-operation o	complete with requir	ed (indicate below):		st 18 th , 2021
Meal Type/Age	Estimated Total No. of Meals Per Day	Estimated No. of Serving Days per Year	Unit Price per Meal	Total Price	Delivery or Pick-up Time	
Breakfast(1-5)*	20 + Milk ONLY	180	.50 per milk	180 day times		
Breakfast(6-12)						
AM Snack(1-5)*						
AM Snack(6-12)						
Lunch(1-5)*						
Lunch(6-12)						
PM Snack(1-5)* PM Snack(6-12)				- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
TWI Shack(o 12)						
		G	RAND TOTAL PRICE:	\$ <u>1800.00</u>		
Provide meals in: Prepare meals for: _ Provide delivery slips Submit billing invoice Maintain receipts and	eet or exceed the Ch NA_ bulk or _NA _NA pick up by co using the KY CACFI e for payment by the d cost determination	nild and Adult Care Foo unitized enter orNA delive P delivery slip form or e5TH of each ron on records for a period the KY CACFP, represe	ery by School Distr equivalent. month to mailing a of 3 years after the	ict Food Service at ddress provided b e end of the agree	t the time(s) indicate y center. ement period to whi	ch they pertain.
Kenton County Schools. If for any reason	ool District Food Se , this agreement is	neals based on the aborvice warrants meals part of the notice of the not	provided are safe and terminer party may terminer	nd wholesome, bu	et that any liability is ses with a 2 week no	s severed upon re
: Authorized Signature Date			Ву:	Authorized Si	gnature	 Date
	Title			Titl	e	
Child Cara Contar			School District Food Society			
Child	Child Care Center			School District Food Service		