

SFSP Sponsor Application For School Year: 2023 - 2024

10206 Status: Active
Marion County Board of Education
 DBA:
 755 East Main Street
 Lebanon, KY 40033-1701

Type of Agency: Educational Institution
 Type of SFSP Organization: School Food Authority

Version: Original

Sponsor Type

1. Type of Agency: Educational Institution
2. Type of SFSP Organization: School Food Authority

Physical Address

3. Address Line 1: 755 East Main Street
Address Line 2:
4. City: Lebanon
5. State: KY Zip: 40033-1701 [USPS Zip Code Lookup](#)
6. County: MARION COUNTY (075)


Mailing Address

7. Address Line 1: 755 East Main Street
Address Line 2:
8. City: Lebanon
9. State: KY Zip: 40033-1701 [USPS Zip Code Lookup](#)

Summer Food Service Program Contact

- | | Salutation | First Name | Last Name |
|--|--------------------------------------|------------|---------------------|
| 10. Name: | Mrs. | Jennifer | Wheeler |
| 11. Email Address:  | jennifer.wheeler@marion.kyschools.us | | |
| 12. Phone: | (270) 692-3721 | Ext: 230 | Fax: (270) 692-1899 |
| 13. Title: | Food Service Director | | |

Primary Authorized Representative

- | | Salutation | First Name | Last Name |
|--|--------------------------------------|------------|---------------------|
| 14. Name: | Mrs. | Jennifer | Wheeler |
| 15. Date of Birth: | 06/27/1973 (mm/dd/yyyy) | | |
| 16. Email Address:  | jennifer.wheeler@marion.kyschools.us | | |
| 17. Phone: | (270) 692-3721 | Ext: 230 | Fax: (270) 692-1899 |
| 18. Title: | Food Service Director | | |

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General Questions

22. Does your agency provide year round public services to the community(ies) other than operating the SFSP? Yes No

If **No**, which of the following circumstance applies?

If **Other**, please describe.

23. How will meals be prepared for sites?

Self-prep by sponsor's food production facility

If **Vended-meals**, please specify:

Name of Vendor:

Type of Agreement:

24. Has the Sponsor received \$750,000 or more in TOTAL federal funds for any programs administered? Yes No

Outreach

25. How will you advertise your program?

- Sponsor Website
- Social Media
- Newspaper
- TV/Radio
- Flyers/Signs
- School Newspaper
- Other Principals parent emails

Certification

26. I hereby certify that neither the Sponsor nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

I certify under penalty of perjury that the information on these application forms is true and correct, and that I will immediately report to the state agency any changes that occur to the information submitted. I certify that I am aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and Federal Statutes. I understand that this information is being given in connection with receipt of federal funds. The state agency may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable federal and state criminal statutes.

On behalf of the Sponsor, I hereby agree to comply with all state and federal laws and regulations governing the Child Nutrition Programs administered by the state agency. In accordance with Federal law and U.S. Department of Agriculture policy, this Sponsor does not discriminate on the basis of race, color, national origin, sex, age or disability. I will ensure that all monthly claims for reimbursement are true and correct and that records are available to support these claims.

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