

AT RISK AFTER SCHOOL ADDENDUM

Sponsor/Institution: _____ Effective Date: _____ (WVDE USE ONLY)

The sponsor/Institution plans to serve At Risk: **SNACK** **SUPPER** Date Expires: _____
 (circle all that apply)

Please complete one of form per county. Attach additional pages if more space is needed.

The after-school program(s) claimed under this provision is/are located in a geographical area served by school in which **50 percent** or more of the children enrolled are certified as eligible for free or reduced price school meals:

SITE (site name and address where snack program is located)	COUNTY	SCHOOL (located closest to child care site)	% NEEDED (from the OCN)	Certification of School Attendance Zone (Initials of School Official)

For the sponsor/institution participating in the At Risk After School Program:

1. These programs are organized primarily to provide care after school hours, on weekends and holidays during the regular school year and have an education or enrichment purpose.
2. Reimbursement is limited to one supplement and/or meal per child per day. Snacks and supper will be provided to school age children through the age of 18 years old.
3. Supplements and suppers will be served to children free of charge and will be reimbursed at the "free" rate.
4. Enrichment and/or educational activities are provided: (Please list in the space provided.)

Signature of Authorized Official from Child Care Institution **Date**

- For outside school hours programs without a WVDHHR license, please attach the following information per site:**
- 1) **A current local health/sanitation inspection report for the center.**
 - 2) **A current local fire/safety inspection report for the center.**

For the **School Official** (i.e. principal, transportation officer, food service director, etc.):

I certify with my initials above and my signature below that the at-risk after school snack sites are in the attendance zone of the schools listed.

Signature of School Official **Date**

Telephone Number