

Schedule A- Agreement and Policy Statement

School Year 2022-2023

School: _____ School LEA: _____ Grade Span: _____
Manager: _____ Manager Phone #: _____ Ext: _____
Number of Serving Sites: _____

<u>Prices</u>	Paid	Reduced	Adult	Standard	PK	K-5	K-8
Breakfast:	_____	_____	_____	CEP		6-8	9-12
Lunch:	_____	_____	_____	P2			

Breakfast Menu Planning
Lunch Menu Planning

Alternative Breakfast:
(a) Grab/Go Cafeteria
(b) Grab/Go Not in Cafeteria
(c) In Classroom (BIC)
(d) 2nd Chance Breakfast
(e) Other, please attach

Preschool Meals:
Do you serve preschool meals? Yes No
Meals claimed through ADE, CNU? Yes No
Estimated PK Enrollment: _____
PK Start Date: _____ PK End Date: _____
Total Number of PK Days Served: _____

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If changes occur to the above information at any time during the school year, please provide changes in writing to ADE.CNU-A-PS@ade.arkansas.gov

Entered On-Line Claim System: _____
[Initials and Date]

Entered CN Database: _____
[Initials and Date]