**Gender Separation Exception Request**

*This form is intended to be used by a contracting entity (CE) to request an exception to the prohibition on gender-separated meal service. TDA will grant an exception to the prohibition on gender-separated meal service if the CE meets the circumstances outlined by USDA (SP 31-2015, CACFP 12-2015, and SFSP 14-2015, March 20, 2015).*

**This form must be completed and signed by a current authorized representative for the CE.**

To request an exception to the gender separation prohibition, take the following actions.

1. Complete the Gender Separation Exception Request Form. This form may be completed using one of the following methods:
* Web-based form accessed in the Texas Unified Nutrition Programs Systems (TX-UNPS) Application Module, Download Forms screen, submitted online as directed on the form
* Word file accessed at [*www.squaremeals.org*](www.squaremeals.org), submitted by FAX to (888) 203-6593; by email attachment to *Squaremeals@TexasAgriculture.gov*; or by mail to Texas Department of Agriculture, P. O. Box 12847, Austin, Texas 78711-2847
1. Ensure that the request form is signed by a duly authorized representative of the CE for the current program year and attest to the information provided in the request form.
2. Submit the request to the Texas Department of Agriculture (TDA) using one the methods described above.
3. Retain all documentation related to an approved exception for the period of time the circumstance, as described in Part II of this form, exists **plus** the required years of retention for the program.

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| Private Schools, Other Nonprofit Organizations, and Residential Child Care Institutions | = | Period of Time the Circumstance Exists As Described in an Approved Exception | + | 3 years |
| Public Schools and Charter School | = | Period of Time the Circumstance Exists As Described in an Approved Exception | + | 5 years |

Questions about this form may be submitted to the Texas Department of Agriculture (TDA) by email to *Squaremeals@TexasAgriculture.gov*. *Gender Separation* should be recorded in the email subject line.

**\*** Indicates required fields.

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| **Part I: CE Information**  |
| ***Provide the information requested in the spaces below.*** |
| **CE Name: \***  |  | **CE Identification Number (CE ID): \***  |  |
| **Site Name**: **\***  |  | **Site Identification Number (Site ID):\***  |  |

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| **Part 2. Circumstances** |
| ***Check each circumstance that applies and provide a brief statement about why separation by gender is necessary.*\*** |
| [ ]  Meal service at religious institutions operating under the dictates (laws or decrees) of the religion with which they are affiliated (i.e., religious doctrines that prohibit mixing or co-mingling different genders) | *Brief statement describing religious dictates that require gender separation:* |
|  |
|  |  |
| [ ]  Meal service at juvenile correctional facilities where combining the members of opposite gender would present a potential safety risk (i.e., juvenile detention centers where genders are separated for safety) | *Brief statement describing why circumstances indicate a potential safety risk:* |
|  |
|  |  |
| [ ]  Meal service at facilities that fully separate by gender as part of their normal operations (summer camps or conferences where gender separation is essential to the program’s design, i.e., gender-based conferences or summer programs) | *Brief statement describing circumstances where gender separation is part of normal CE operations:* |
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|  |  |
| [ ]  Other | *Brief statement describing the other circumstances which dictate the need for gender separation.*  |
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| **Part 3. Attestation Statement** |
| ***Check each of the following statements as true.*** |

[ ]  I certify that the information provided on this form is true and accurate.**\***

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| --- | --- | --- |
| ***Electronic signature (name of person attesting to the information in this form):\**** |  | ***CE Phone Number \**** |
|  |  |  |
| ***Title of Authorized Representative\**** |  | ***Email Address for Confirmation:\**** |
|  |  |  |
| ***Form Completion Date:\**** |  | ***Alternate Email Address:*** |
|  |  |  |

If using the web-based form, select *Submit* to send form to TDA.

Or submit by FAX to (888) 203-6593; by email attachment to *Squaremeals@TexasAgriculture.gov*; or by mail to Texas Department of Agriculture, P. O. Box 12847, Austin, Texas 78711-2847.