

INSTRUCTIONS FOR Collection of Child Nutrition Program Participant Racial/Ethnic Data Prototypes

All USDA Food and Nutrition Service (FNS) Program operators are required per FNS Instruction 113-1 to collect racial and ethnic data from their respective Programs' participants. Data is used to:

- Determine how effectively FNS programs are reaching potential eligible persons and beneficiaries
- Identify areas where additional outreach is needed
- Determine any barriers to access
- Assess the institution and sponsor compliance.
- Analyze the impact of policy changes on participants
- Investigate program discrimination complaints.

For programs that require participant enrollment, operators should gather this information within enrollment documentation. However, for Programs that operate open sites with no required participant enrollment, racial/ethnic data is difficult to obtain because **visual observation is not an allowable method**. Instead, Contracting Entities (CEs) must rely on participant self-identification or self-reporting to obtain this data.

TDA recognizes that options for obtaining racial and ethnic data at sites that do not require enrollment are limited. While requesting data verbally is allowable, TDA discourages the practice of asking a child to self-identify their race and ethnicity, as this practice may confuse young children. The site can document a participant as "unknown" if a parent or guardian is not present or chooses not to self-identify.

To assist CEs and sites in collecting this data, TDA has developed the prototypes and best practices below as tools that Program Operators may choose to use to assist in the collection of this data.

REMEMBER:

- Program operators must only collect this data once annually; therefore, data may be collected over a single operating day during the Program Year.
- Operators should ask adult participants and parents/guardians to identify the racial or ethnic group of the participant only after it has been explained, and they understand, that:
 - Providing the information is to ensure compliance with USDA nondiscrimination requirements only; and
 - Failure to report the information will not affect the participant's eligibility for meals.

USE OF FORMS A and B

Depending on your service model, Forms A and B below may be used individually or together to collect racial and ethnic data. For example:

- Multiple copies of Form A may be printed and distributed to each participant for self-completion. Information can then be consolidated on Form B later. If distributing a form to a child is not feasible or appropriate (for example, no accompanying parent or guardian), the site representative can complete the form on the participant's behalf, marking "Unknown." NOTE: If using this method, the site must keep each form received by a participant or completed on behalf of a participant.
- Sites may choose to only use Form B at the point of service and verbally ask each participant, as feasible, to provide the information. The site representative can complete an entry as each participant receives a meal. NOTE: If using this method, each participant must be informed of why this information is being collected and that failure to report will not affect the participant's eligibility to receive a meal. This information can be explained verbally or printed out for the participant to read.

Use of these forms is optional; however, the CE must document the process used to collect this data and maintain all data and forms received.

Collection of Participant Racial/Ethnic Data (Form A)

[Insert Date of Collection]

[INSERT SITE/OPERATOR NAME] is required by federal law to collect racial and ethnic data of participants receiving meals. This data can be used to:

- Determine how effectively our program is reaching potential eligible persons and beneficiaries
- Identify areas where additional outreach is needed
- Determine any barriers to access

While we encourage you to provide the below information, there is no penalty for declining to self-identify. Thank you and enjoy your meal!

1. Are you Hispanic or Latino?

- Yes
- No
- Decline to answer

2. Regardless of your answer to the prior question, how do you identify yourself?

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Decline to answer

Collection of Child Nutrition Program Participant Racial/Ethnic Data (Form B)

Name of Contracting Entity (CE)	CE ID	Name of Site/Provider	Site/Provider #.	Date Collected	
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Participant Ethnicity		Participant Race		Information Source	If Information Unknown, Select Reason
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Unknown	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Unknown	<input type="checkbox"/> Parent/Guardian provided information	<input type="checkbox"/> Child only present
<input type="checkbox"/> Not Hispanic or Latino		<input type="checkbox"/> Asian <input type="checkbox"/> Black or African American		<input type="checkbox"/> School Enrollment Data	<input type="checkbox"/> Parent/Guardian chose not to report
		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White			<input type="checkbox"/> Other
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Unknown	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Unknown	<input type="checkbox"/> Parent/Guardian provided information	<input type="checkbox"/> Child only present
<input type="checkbox"/> Not Hispanic or Latino		<input type="checkbox"/> Asian <input type="checkbox"/> Black or African American		<input type="checkbox"/> School Enrollment Data	<input type="checkbox"/> Parent/Guardian chose not to report
		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White			<input type="checkbox"/> Other
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Unknown	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Unknown	<input type="checkbox"/> Parent/Guardian provided information	<input type="checkbox"/> Child only present
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		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White			<input type="checkbox"/> Other
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		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White			<input type="checkbox"/> Other

Use additional pages as required.

Ethnic Categories	Number of Participating Children		Racial Categories	Number of Participating Children
Hispanic or Latino			American Indian or Alaskan Native	
Not Hispanic or Latino			Asian	
			Black or African American	
			Native Hawaiian or Other Pacific Islander	
			White	

I certify that the information on this form is true and correct to the best of my knowledge. I understand that misrepresentation or withholding of information may result in prosecution under applicable state and Federal laws.

Signature - Authorized Representative

Date

Title

**Collection of Child Nutrition Program Participant Racial/Ethnic Data
(Additional Page – Use as Many as Required))**

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