

**INSTRUCTIONS FOR  
FOOD & NUTRITION  
CHILD AND ADULT CARE FOOD PROGRAM  
APPLICATION TRACKING - CENTERS**

Organizations may use this form to show the submittal status of each document required in the application process.  
**The use of this form is optional.**

**SECTION I – ORGANIZATION INFORMATION**

1. **Name of Organization** – Enter the name of the organization.
  2. **CE ID** – Enter the five-digit CE ID that has been assigned to you by the Texas Unified Nutrition Programs System (TX-UNPS). If you do not know your CE ID, leave blank.
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**SECTION II – CONTRACTING ENTITY APPLICATION PACKET and SECTION IV – SITE APPLICATION – CENTERS AND CHECKLIST ITEMS**

For each line item, indicate if the document was submitted in TX-UNPS or is attached. If neither applies, leave blank.

If you have more than one Site Application and Checklist Items to submit, attach a list by Site Name and Site ID (if known), using the categories listed.

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**SECTION III – CHECKLIST ITEMS: CE APPLICATION – CENTERS**

For each line item, indicate if attached.

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**SECTION V – SIGNATURE**

An official of the organization signs, dates and prints their name and title. This official must be an authorized representative.

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**SUBMITTAL**

Submit using one of the following methods:

**E-mail to:**

[CACFP.Bops@TexasAgriculture.gov](mailto:CACFP.Bops@TexasAgriculture.gov)

**Fax to:**

888-223-8645

**Mail to:**

Texas Department of Agriculture  
Food and Nutrition  
Attn: F&N Business Operations – Applications  
P.O. Box 12847  
Austin, Texas 78711

**Overnight to:**

Texas Department of Agriculture  
Food and Nutrition  
Attn: F&N Business Operations – Applications  
1700 North Congress Ave.  
Austin, Texas 78701

**SECTION I – ORGANIZATION INFORMATION**

1. Name of Contracting Entity (CE):	2. CE ID:

**SECTIONS II – CONTRACTING ENTITY APPLICATION PACKET**

	Submitted in TX-UNPS	Attached
Contracting Entity Application – Centers	<input type="checkbox"/>	<input type="checkbox"/>
Contracting Entity Budget Detail - Centers	<input type="checkbox"/>	<input type="checkbox"/>
Budget Detail Worksheet – Centers (upload document)	<input type="checkbox"/>	<input type="checkbox"/>
Board of Directors – Centers	<input type="checkbox"/>	<input type="checkbox"/>
Annual Audit	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION III – CHECKLIST ITEMS: CE APPLICATION – CENTERS**

	Attached
FND Permanent Agreement	<input type="checkbox"/>
Permanent Agreement Contracting Entity Specific Amendment	<input type="checkbox"/>
Vendor Direct Deposit/Advance Payment Notification Authorization (74-176)	<input type="checkbox"/>
Application for Texas Identification Number (AP-152)	<input type="checkbox"/>
A. Copy of document from the IRS that establishes your EIN	<input type="checkbox"/>
Contracting Entity Management Plan – Centers form, with attachments	<input type="checkbox"/>
A. Sponsoring Organization Monitoring Staff Information - Centers form	<input type="checkbox"/>
B. Proof of IRS 501(c)(3) Tax Exemption (non-profit organizations only)	<input type="checkbox"/>
C. Organizational Chart	<input type="checkbox"/>
D. Annual Renewal Certification	<input type="checkbox"/>
Performance Bond	<input type="checkbox"/>
Pre-Award Civil Rights Compliance Review	<input type="checkbox"/>
Subcontractor Agreements	
A. Invitation for Bid and Contract for Purchased Meals (IFB)	<input type="checkbox"/>
B. Contract with a Public School for Meals	<input type="checkbox"/>
C. Sub-contractor and/or Consultant Agreements	<input type="checkbox"/>
Legal Documents	
A. Articles of Incorporation, Assumed Name Certificate, Certification of Formation (submit all that apply to your organization)	<input type="checkbox"/>
B. Government Issued ID for each principal of the contracting entity (applies to non-governmental contracting entities only).	<input type="checkbox"/>
C. Proof of Residential (Home) Mailing address for each principal of the contracting entity (applies to non-governmental contracting entities only)	<input type="checkbox"/>

Governing Body Awareness	<input type="checkbox"/>
Certificate of Authority	<input type="checkbox"/>
Other: Explain	<input type="checkbox"/>
Other: Explain	<input type="checkbox"/>

**SECTION IV – SITE APPLICATION – CENTERS AND CHECKLIST ITEMS**

If you have more than one Site Application and Checklist Items to submit, attach a list by Site Name and Site ID (if known), using the below categories.

	Submitted in TX-UNPS	Attached
Site Application – Centers	<input type="checkbox"/>	<input type="checkbox"/>
License, Exemption or Other Documentation		<input type="checkbox"/>
A. Health and Safety Documentation		<input type="checkbox"/>
At-Risk: Documentation of Area Eligibility and Education/Enrichment Activities		<input type="checkbox"/>

**SECTION V - SIGNATURE**

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Signature – Official of Organization Date

Name (please type or print)	Title