

# 2018 Project Produce

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## *Chef Ann Foundation*

### *Program Details*

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#### **Overview**

This is a \$2,000 grant to purchase fresh fruits, vegetables, and whole food ingredients for taste testing, recipe testing, and food literacy activities. All students, regardless of participation, must have access to the activities of this grant and all activities must occur in the cafeteria. The intention of this grant is for the taste testings and recipe testing to influence future menu planning.

In this application, you will describe how your proposed project will address the following 4 program goals:

1. Increase student exposure to fresh fruits, vegetables, and scratch-cooked recipes through taste testing and recipe testing
2. Provide food literacy activities such as cooking demos, farmer visits, and nutrition education
3. Implement a peer-to-peer marketing campaign
4. Integrate new favorite fruits, vegetables and recipes into menu planning

#### **Program Requirements**

- School must participate in the National School Lunch Program and have at least 50% of students eligible for the Federal Free and Reduced Priced Meal program.
- Grant funds must be used to purchase fresh fruits and vegetables to support your planned project. You may also use funds to purchase other food items used in scratch cooked recipe testing.
- Recipes for testing must include elements of scratch-cooking and credit to the fruit or vegetable component of the meal pattern.
- Taste tests and recipe testing must take place in the school cafeteria during the school day.
- Up to 10% of grant funds can be used on supplies that support the nutrition education and food literacy activities such as printouts of nutrition facts or tasting cups.
- Schools are encouraged to purchase local produce.

#### **Program Requirements Continued**

- Schools must complete a program evaluation at the end of the grant period. **This evaluation will require submission of receipts or invoices from all purchases made using grant funds.**
- Funds may not be used to support the cost of reimbursable meals, staff hours, transportation, collateral materials, or other programming costs.
- A school nutrition director, manager, or supervisor must be the applicant; however, grant coordinators, wellness coordinators, teachers, or others are welcome to assist the school in implementing the project.

## *District Information*

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### **District Name\***

What is the full name of the district?

*Character Limit: 100*

### **District Enrollment\***

What is the total enrollment of the district?

*Character Limit: 10*

### **School Nutrition Director Name\***

*Character Limit: 100*

### **School Nutrition Director Email\***

*Character Limit: 100*

### **School Nutrition Director Phone\***

*Character Limit: 20*

### **Name of Person Completing this Application (if different than school nutrition director)**

*Character Limit: 100*

### **Email of Person Completing this Application (if different than school nutrition director)**

*Character Limit: 100*

### **Title of Person Completing this Application (if different than school nutrition director)**

*Character Limit: 100*

### **District Free and Reduced Percentage\***

In your district, what is the percentage of the students eligible for the Federal Free and Reduced-Price Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

### **District - ADP as a Percentage of Enrollment\***

What is the percentage of daily average participation in the National School Lunch Program in your district? (Divide your ADP by the district enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

### **Food Cost\***

As a percentage of your total food cost, what percentage is spent on fruits and vegetables, including fresh, frozen and canned fruits and vegetables? (Do not include your DOD allocation in the total. Your answer will be between 1 and 100.)

*Character Limit: 5*

### **Canned Fruits and Vegetables Percentage\***

Considering the total amount of fruits and vegetables (fresh, frozen and canned) that are purchased, prepared and served in the district, what percentage is canned? (Your answer will be between 0 and 100)

*Character Limit: 5*

### **Local Fruits and Vegetables Percentage\***

In your best estimate, with regard to your total fruit and vegetable expenses, what percentage of your total produce purchases are procured from local sources? (Your answer will be between 0 and 100)

*Character Limit: 5*

### **DOD Fresh Program 1\***

As a district, do you participate in the USDA's DOD Fresh program?

#### **Choices**

Yes

No

### **DOD Fresh Program 2\***

If yes, what is the total dollar value that you allocated to DOD for the current school year? (Enter 0 if you do not participate in the DOD Fresh program.)

*Character Limit: 20*

### **Nutrition Education Districtwide\***

What types of nutrition education or other activities that promote increased fruit and vegetable consumption is your district already engaged in? Check all that apply.

#### **Choices**

- Fresh Fruit and Vegetable program
- Contests and Promotional Giveaways
- Taste tests
- Farm visits
- School gardens
- Other
- None

### Grant Information\*

How did you hear about the Project Produce Grant program?

#### Choices

- Chef Ann Foundation website
- Facebook
- From a colleague
- Internet Search
- My state's Child Nutrition website or newsletter
- Our district's grant specialist
- The Lunch Box website
- Twitter
- Other

### Project Name\*

Name of Project.

*Character Limit: 100*

## School #1

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**Please enter school-specific information below. You may apply for a \$2,000 Project Produce grant for each school, up to a maximum of five schools.**

### School #1: School Name\*

What is the full name of the school (For Example: West Lake Elementary School)?

*Character Limit: 100*

### School #1: Type of School\*

What age groups does the applicant school serve? (Choose the selection that most resembles the school you are applying for.)

#### Choices

- Elementary - grades K-5
- Middle - grades 6-8
- High - grades 9-12
- K-8 - grades K-8
- Middle/High - grades 6-12
- All of the above - grades K-12

**School #1: Enrollment\***

What is the total enrollment of the school you are applying for?

*Character Limit: 10*

**School #1: School Free and Reduced Percentage\***

In the school, what is the percentage of the students eligible for the Federal Free and Reduced Priced Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

**School #1: Average Daily Participation\***

What is the daily average participation in the National School Lunch Program in the school you are applying for?

*Character Limit: 5*

**School #1: ADP as a Percentage of Enrollment\***

What is the percentage of daily average participation in the National School Lunch Program in the school you are applying for? (Divide the ADP by the school enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

\*If there are no additional schools that need to be entered, please collapse the School Information question groups and move on to the Program Goals and Details question group.

## *School #2*

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**School #2: School Name**

What is the full name of the school (For Example: West Lake Elementary School)?

*Character Limit: 100*

**School #2: Type of School**

What age groups does the applicant school serve? (Choose the selection that most resembles the school you are applying for.)

**Choices**

Elementary - grades K-5

Middle - grades 6-8

High - grades 9-12

K-8 - grades K-8

Middle/High - grades 6-12

All of the above - grades K-12

## School #2: Enrollment

What is the total enrollment of the school you are applying for?

*Character Limit: 10*

## School #2: School Free and Reduced Percentage

In the school, what is the percentage of the students eligible for the Federal Free and Reduced Priced Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

## School #2: Average Daily Participation

What is the daily average participation in the National School Lunch Program in the school you are applying for?

*Character Limit: 5*

## School #2: ADP as a Percentage of Enrollment

What is the percentage of daily average participation in the National School Lunch Program in the school you are applying for? (Divide the ADP by the school enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

\*If there are no additional schools that need to be entered, please collapse the School Information question groups and move on to the Program Goals and Details question group.

## School #3

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### School #3: School Name

What is the full name of the school (For Example: West Lake Elementary School)?

*Character Limit: 100*

### School #3: Type of School

What age groups does the applicant school serve? (Choose the selection that most resembles the school you are applying for.)

#### Choices

Elementary - grades K-5

Middle - grades 6-8

High - grades 9-12

K-8 - grades K-8

Middle/High - grades 6-12

All of the above - grades K-12

### School #3: Enrollment

What is the total enrollment of the school you are applying for?

*Character Limit: 10*

### **School #3: School Free and Reduced Percentage**

In the school, what is the percentage of the students eligible for the Federal Free and Reduced Priced Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

### **School #3: Average Daily Participation**

What is the daily average participation in the National School Lunch Program in the school you are applying for?

*Character Limit: 5*

### **School #3: ADP as a Percentage of Enrollment**

What is the percentage of daily average participation in the National School Lunch Program in the school you are applying for? (Divide the ADP by the school enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

\*If there are no additional schools that need to be entered, please collapse the School Information question groups and move on to the Program Goals and Details question group.

## **School #4**

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### **School #4: School Name**

What is the full name of the school (For Example: West Lake Elementary School)?

*Character Limit: 100*

### **School #4: Type of School**

What age groups does the applicant school serve? (Choose the selection that most resembles the school you are applying for.)

#### **Choices**

Elementary - grades K-5

Middle - grades 6-8

High - grades 9-12

K-8 - grades K-8

Middle/High - grades 6-12

All of the above - grades K-12

### **School #4: Enrollment**

What is the total enrollment of the school you are applying for?

*Character Limit: 10*

**School #4: School Free and Reduced Percentage**

In the school, what is the percentage of the students eligible for the Federal Free and Reduced Priced Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

**School #4: Average Daily Participation**

What is the daily average participation in the National School Lunch Program in the school you are applying for?

*Character Limit: 5*

**School #4: ADP as a Percentage of Enrollment**

What is the percentage of daily average participation in the National School Lunch Program in the school you are applying for? (Divide the ADP by the school enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

\*If there are no additional schools that need to be entered, please collapse the School Information question groups and move on to the Program Goals and Details question group.

## *School #5*

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**School #5: School Name**

What is the full name of the school (For Example: West Lake Elementary School)?

*Character Limit: 100*

**School #5: Type of School**

What age groups does the applicant school serve? (Choose the selection that most resembles the school you are applying for.)

**Choices**

Elementary - grades K-5

Middle - grades 6-8

High - grades 9-12

K-8 - grades K-8

Middle/High - grades 6-12

All of the above - grades K-12

**School #5: Enrollment**

What is the total enrollment of the school you are applying for?

*Character Limit: 10*



**School #5: School Free and Reduced Percentage**

In the school, what is the percentage of the students eligible for the Federal Free and Reduced Priced Meal Program? (Answer will be between 1 and 100)

*Character Limit: 5*

**School #5: Average Daily Participation**

What is the daily average participation in the National School Lunch Program in the school you are applying for?

*Character Limit: 5*

**School #5: ADP as a Percentage of Enrollment**

What is the percentage of daily average participation in the National School Lunch Program in the school you are applying for? (Divide the ADP by the school enrollment and multiply by 100. This will be a %)

*Character Limit: 5*

## *Project Goals and Details*

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**Project Description: Goal 1\***

Describe how your project will use taste testing and recipes testing to increase student exposure of fresh fruits, vegetables, and/or scratch cooked recipes. Common projects to address this goal include hosting seasonal or cultural taste tests and scratch recipe testing, but we are open to your creative ideas. The project may take place during service times at lunch or at another time during the school day, as long as the activity is available to all students and held in the cafeteria. Include how will you collect student feedback during the taste tests and recipe tests.

*Character Limit: 5000*

**Project Description: Goal 2\***

Describe the food literacy and nutrition education that will complement your taste testing and recipe testing. Common examples include education on the history or cultural relevance of the items, lessons from farmers who produce the foods, recipe cards for students to take home, etc. We are open to your creative ideas!

*Character Limit: 5000*

**Project Description: Goal 3\***

Describe how you will support a student peer-to-peer marketing campaign. Once students discover their favorite fruits, vegetables, and recipes, describe how they will take an active role in promoting the items with their peers. Student involvement and peer-to-peer marketing strategies may include passing out samples, designing posters, creatively naming and advertising new recipes, etc.

*Character Limit: 5000*

### Project Description: Goal 4\*

Describe how you will integrate feedback from students about their favorite fruits, vegetables, and recipes into the menu.

*Character Limit: 5000*

### Timeline\*

Selected schools will receive their grant funds in summer 2018.

Grant activities must be implemented in August, September, October, and November 2018.

All grant funds must be spent by December 2018.

Schools must complete an evaluation (which includes providing receipts or invoices for all items purchased with grant funds) by **December 31, 2018**.

Can you accomplish your proposed project during this timeframe?

### Choices

Yes

No

### Marketing\*

Which of the following marketing channels will you use to promote the project to families and the school community?

### Choices

Social Media

Newsletters

Website

### Other Marketing

If you plan to market using other channels please describe them here.

*Character Limit: 1000*

## Evaluation

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You will be required to report the following information in your program evaluation:

- Number of fruit, vegetables, and recipes taste tested
- Names of fruits, vegetables, and recipes taste tested
- Favorite fruits, vegetables, and recipes selected by students
- Changes in future meal planning based on results of the taste tests and recipe tests
- Description of the student led marketing activities
- Any changes (reductions) in purchases of canned fruits and vegetables
- Any changes (increases) in purchases of fresh fruits and vegetables

- Any changes (increases) in purchases of LOCAL fruits and vegetables

### **Name**

Name of person who will be responsible for completing the evaluation (if different than person filling out this application).

*Character Limit: 100*

### **Email**

Email of person who will be responsible for completing the evaluation (if different than person filling out this application).

*Character Limit: 100*

### **Phone Number**

Phone number of person who will be responsible for completing the evaluation (if different than person filling out this application).

*Character Limit: 50*

## *Grant Documents*

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### **Budget Template\***

Please download our Project Budget Template by clicking [HERE](#).

Once you have completed the template you will need to "Save as" and then re-upload by clicking "Upload a file" below.

*File Size Limit: 10 MB*

### **Additional Budget Information**

If you have additional information you would like to add you may upload or add it below.

*Character Limit: 1000 | File Size Limit: 3 MB*

### **Grant Verification Form\***

Carefully download and read the agreement and fill out all fields. The form must be physically signed (not digitally signed) by both the Food Services Director and the Superintendent of the Applicant District.

To upload you can scan the document and upload it back to your application via the "Upload a file" button below or use the Fax to File option found on the upper left of your screen.

*File Size Limit: 5 MB*