



Washington Office of Superintendent of
PUBLIC INSTRUCTION

Child and Adult Care Food Program Change Form

Child and Adult Care Food Program (CACFP) Sponsors may choose to terminate their Child Nutrition Programs (CNP) permanent agreement with the Office of Superintendent of Public Instruction (OSPI) for *convenience*. This means termination of the Program agreement is due to considerations unrelated to either party's performance of Program responsibilities under the agreement and does not result in ineligibility for any CNP 7 CFR 226.2.

To remain in "good standing" with OSPI Child Nutrition Programs, all assigned corrective action items must be approved by OSPI and all pending fiscal action must be paid in full to OSPI prior to agreement termination. Institutions, and their responsible principles (RPs), who self-terminate prior to OSPI corrective action plan approval or prior to paying fiscal action in full, will be added to the United States Department of Agriculture (USDA) National Disqualified List 7 CFR 226.6(c)(2)(iii)(A) (6). These Institutions and RPs will not be eligible to operate any Child Nutrition Program in Washington and will not be able to operate CACFP or the Summer Food Service Program (SFSP) in any state.

When terminating for convenience, Sponsors may choose to self-terminate their agreement with OSPI and:

- Cease CACFP operation
or
- Continue CACFP operation as an unaffiliated site under a current CACFP Sponsoring Organization. Sponsors must provide OSPI notice of termination at least 60 days prior to transfer date.

If Sponsors choose to return to CACFP with OSPI after ceasing operation, they must re-apply, attend required trainings for new Sponsors and undergo a financial viability and administrative capability assessment prior to application approval.

Instructions:

1. On page 2, check the box to indicate if you are ceasing CACFP operation or continuing CACFP operation under a Sponsoring Organization.
2. Complete the appropriate table indicating Sponsor name, termination date, and name of new Sponsoring Organization, if applicable, along with your start date.
3. Detail the reason for self-termination.
4. The Institution Representative with signature authority must print their name and title then sign and date the form.
5. Return to your Program Specialist for review and processing.

☐ Our Institution is self-terminating our OSPI CNP permanent agreement and ceasing CACFP operation.

| Sponsor Name | Termination Date |
|--|------------------|
| | |
| Reason for self-termination, please include burdens or barriers to CACFP operation: | |
| How many ECEAP or Head Start/Early Head Start Slots do you have? | |
| ECEAP | Head Start |
| | Early Head Start |
| What resources will be used to fund your meal service operation? | |
| Under what circumstances would you consider returning to CACFP? | |

☐ Our Institution is self-terminating our OSPI CNP permanent agreement and continuing CACFP operation as an unaffiliated site under a current Sponsoring Organization.

| Sponsor Name | Termination Date |
|--|-------------------|
| | |
| Name of new Sponsoring Organization | Start Date |
| | |
| Reason for self-termination: | |

PRINTED NAME OF INSTITUTION REPRESENTATIVE

TITLE

SIGNATURE OF INSTITUTION REPRESENTATIVE

DATE

OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION USE ONLY

Month of last claim:

WINS Inactive date:

Sponsor is in "Good Standing" and does not have outstanding fiscal action or corrective action.

Date of transfer verified and accurately reported by Sponsor:

(only required for transfers):

Sponsor reported termination date:

New Sponsor reported start date:

SIGNATURE OF OSPI REPRESENTATIVE

DATE