



Missouri Department of Health and
Senior Services (DHSS)
Summer Food Service Program (SFSP)
Application Packet Submission – Quick Reference Guide

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Application Packet Overview

To participate in the Summer Food Service Program (SFSP) sponsors must submit an application packet to the state for review and approval. The packet is made up of on-line and off-line forms that must be completed at the beginning of each program year. State users are responsible for approving each sponsor's forms.

Required documents that make up a sponsor's application packet will depend on responses within the Sponsor Information Sheet and Site Information Sheets. As these on-line forms are completed, additional required forms will populate the Checklist tab of the Sponsor Summary. Once a sponsor has completed all the required on-line and off-line forms, they will submit them as a packet to the state for approval. Required forms are denoted with a red checkmark.

Submitting the Application Packet

This section provides high-level instructions for submitting an application packet once all required off-line forms have been submitted and all required on-line forms are complete, free of errors, and are in "Pending Submission" status. For detailed information on completing and submitting each individual form required in the application packet, refer to the SFSP Sponsor User Manual.

- 1) Log in and select a program year. If you are an administrator to more than one sponsor, the Select Sponsor screen will display. Select the desired sponsor to continue.
- 2) The Sponsor Summary screen displays. Select the **Checklist** tab.
- 3) Select the **Submit all forms to the State for Approval** button at the bottom of the screen. All forms will enter "Pending Approval" status. No further sponsor action is required until the packet is reviewed by the state.

Sponsor Summary

BB Test (3740)

Checklist Applications Activities Claims Payments Users
 Assigned Specialist: County Bates County

Item	Required	On-Line Forms Description	Count/Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Information Sheet		Pending Submission
2.	<input checked="" type="checkbox"/>	Sponsor Budget Form		Pending Submission
3.	<input checked="" type="checkbox"/>	Sponsor Management Plan		Pending Submission
4.	<input checked="" type="checkbox"/>	Site Information Sheets	1 of 1	Pending Submission

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.		Program Services Contract					
2.	<input checked="" type="checkbox"/>	Documentation of 501(c)(3) Status		1/13/2023	1/13/2023		
3.		Food Service Contract					
4.	<input checked="" type="checkbox"/>	Certificate of Training		1/13/2023	1/13/2023		
5.		Enrollment Form					
6.		Unique Entity Identifier (UEI)					
7.	<input checked="" type="checkbox"/>	SFSP Sponsor/Site Agreement		1/13/2023	1/13/2023		
8.	<input checked="" type="checkbox"/>	Financial Documentation/Bank Statements		1/13/2023	1/13/2023		
9.		Vendor No Tax Due Verification					
10.		National Disqualified List Verification					
11.	<input checked="" type="checkbox"/>	Secretary of State Documents		1/13/2023	1/13/2023		
12.		IRS Good Standing Verification					
13.		Business Entity Certification					
14.	<input checked="" type="checkbox"/>	Vendor Input/Direct Deposit Form		1/13/2023	1/13/2023		
15.	<input checked="" type="checkbox"/>	Policy Statement		1/13/2023	1/13/2023		
16.		Nutritionist Pre-approval Visit					
17.		E-Verify Notarized Affidavit and Box B (Exhibit A, Pages 2-3)					
18.		Sponsor Training Attendance					
19.	<input checked="" type="checkbox"/>	E-Verify Memorandum of Understanding		1/13/2023	1/13/2023		
20.	<input checked="" type="checkbox"/>	Annual Subrecipient Information Form (ASIF)		1/13/2023	1/13/2023		

- Enter Dates for Off-Line Forms
- Submit all forms to the State for Approval

4) Forms approved by the state will enter “Approved” status. Forms denied by the state will enter “Needs Correction” status. You must edit these forms and resubmit your application packet to the state.

Sponsor Summary

AA Test Sponsor (3739)

Checklist Applications Activities Claims Payments Users
 Assigned Specialist: County Cole County

Number	Name	Revision	Status	Date Approved	Action
	Sponsor Information Sheet	0	Approved	3/8/2023	
	Sponsor Budget	0	Approved	3/8/2023	
	Sponsor Management Plan	0	Approved	3/8/2023	
Site Information Sheet(s)					
> 3739-1	AA Test Site	2	Needs Correction		



Note: Once Missouri DHSS approves all forms in the application packet, program enrollment is complete for the year.