

# Sample Verification Checklist

## School Year 2024-25

Local educational agency (LEA): \_\_\_\_\_ Date: \_\_\_\_\_

Type of verification conducted:  Standard Sample Size  Alternate One

1. Did the district/institution follow the instructions in the U.S. Department of Agriculture's (USDA) [Eligibility Manual for School Meals](#) and appropriate Connecticut State Department of Education (CSDE) [operational memoranda](#) to ensure that the verification sample was chosen correctly?  Yes  No

*If "No" explain:*

2. Did anyone from the district/institution attend online training on verification conducted by the CSDE during the past year?  Yes  No

*If "No" explain:*

3. Was more than the required sample size verified?  Yes  No

*If "Yes" explain:*

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4. Were the state agency (CSDE) sample verification forms used?  Yes  No

*If "No" explain:*

5. Was the verification process completed by November 15?  Yes  No

*If "No" explain:*

6. Was a confirmation review conducted by a person other than the determining official?

Yes  No

*If "No" explain:*

7. Were households with foster children verified correctly?  Yes  No

*If "No" explain:*

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8. Were the notifications of changes in eligibility to families sent in a timely manner?  
 Yes  No

*If "No" explain:*

9. Were applications that did not need to be verified replaced by similar applications to meet the required number to be verified?  Yes  No

*If "No" explain:*

10. Was the option to decline to verify no more than 5 percent of applications in the selected sample utilized by the district?  Yes  No

*If "Yes" explain:*

11. Check this box if all calls within the district are local calls:

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12. Was there a second attempt to obtain the family information for verification?

Yes    No    Not applicable

*If "No" explain:*

a. If unable to verify the eligibility, after a reasonable period was a notice of adverse action sent to the families?

Yes    No

*If "No" explain:*

13. If there was a benefit change due to verification, was it properly applied in the lunchroom (ticket, roster, and/or other system)?

Yes    No    Not applicable

*If "No" explain:*

14. Were any households selected for Verification for Cause?

Yes    No    Not applicable

*If "Yes" explain:*

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For more information, visit the Connecticut State Department of Education's (CSDE) [Verification Procedures for School Nutrition Programs](#) webpage or contact the [school nutrition programs staff](#) at the Connecticut State Department of Education, Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841. This document is available at [https://portal.ct.gov/-/media/sde/nutrition/nslp/forms/verification/sample\\_verification\\_checklist.pdf](https://portal.ct.gov/-/media/sde/nutrition/nslp/forms/verification/sample_verification_checklist.pdf).

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

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