Enrolled Homes and Update Summary Form

Sponsoring Organization Name __________________________________________ Month Effective* __________________________

Agreement Number __________________________________________

1) Day Care Homes Number

a) Previously Approved 1 _______
b) Added this Update _______
c) Withdrawn this Update _______
d) Terminated this Update _______
e) Net Change Day Care Homes this Update
   (a+b-c-d) _______

1 These items will not be filled out by the sponsor if this is an initial submission to establish the program.

*See DECAL Policy Memo CACFP/00-5 for more information concerning effective dates.

________________________________  __________________________
Signature of Authorized Official Date

Enrolled Homes and Update Summary Form Instructions

Fill in the name of your organization, your agreement number (new submissions will leave this blank) and the month you would like this update to be effective. Remember that the effective date is governed by the date DECAL received your request for changes. See Policy Memo CACFP/00-5.

1a) Write the number of day care homes that you have been previously approved to sponsor. This number will be on your last approved Enrolled Homes and Update Summary Form. If this is an initial submission, this space will be left blank.

1b) Write the number of homes you would like to add this month. You should have a completed Enrolled Home and Update Form for each of these homes. Please note that a current DHR Registration/License/Inspection Report is required to approve all newly recruited homes.

1c) Write the number of homes you are withdrawing this month. You should have a completed Enrolled Home and Update Form for each of these homes. If this is an initial submission this space will be left blank.

1d) Write the number of homes you are terminating this month. You should attach the termination letter for each home terminated to the Enrolled Homes and Update Summary Form. If this is an initial submission this space will be left blank.

1e) Write the net change in the number of day care homes for this update. The net change is calculated by adding 1a) to 1b) and then subtracting 1c) and 1d).

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2) State Agency Review _______Approved _______Denied

   Effective date__________________________

3) If denied, reasons:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________