

SCHOOL NAME \_\_\_\_\_

SCHOOL CODE (DBN): \_\_\_\_ █ \_\_\_\_ \_\_\_\_ (e.g. 12X590; 01N700)

SCHOOLFOOD CODE (OSF): \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ ( e.g. 12500)

**DELIVER TO:**



**OFFICE OF SCHOOLFOOD  
ELIGIBILITY AND COMPLIANCE UNIT  
44-36 VERNON BOULEVARD  
4<sup>TH</sup> FLOOR - ROOM 417  
LONG ISLAND CITY, NY 11101**

**ATTENTION: NADINE BROWN**

THIS PACKAGE IS

# █ OF █

2011-2012 SCHOOL MEAL /TITLE 1  
APPLICATIONS ENCLOSED