

NSLP Afterschool Snack Service Site List

School/Site Name:	
Grades Participating (list):	
Number of Students Participating:	
Start and End Date:	
Start and End Time:	
School Day End Time:	
Snack Time:	
Days of Operation: \Box M \Box T \Box W \Box Th \Box M-F	
Is the primary purpose of the program afterschool care? \square Yes \square No	
Does the program offer education and enrichment activities in a setting that is structured and supervised? \square Yes, describe below. \square No	
Briefly describe your educational or enrichment program:	_
Is the program open to all children at all times with no exceptions? \Box Yes \Box No	
Site/Area Eligible? □ Yes □ No	
If yes, Eligible School Name:	
If no, is this a pricing or non-pricing program? \square Yes \square No	
If yes, reduced-price charge: paid-status charge:	
If no, other source of funds to cover the cost:	-
Is this a new or a returning program? □ New □ Returning	
Site Coordinator Name: Contact Information:	