CARES Application Module Step by Step Guide

This Guide is a Step by Step guide to assist a user to submit a CARES application. It is to be used in conjunction with the CARES Application Manual.

Institutions are required to submit a application to CACFP to participate in the Food Program for each agreement fiscal year. Agreement Fiscal year is October 1 – September 30 of the application year.

CARES 10 Step by Step Application Process

1. Login to CARES – Refer to Chapter 2
2. Review/Update Business Institution Page – Refer to Chapter 3 Update SAMS
3. Review/Update Facility Maintenance – Refer to Chapter 4 – Update License Expiration Date Yearly
4. Create New Application for Agreement Year – Refer to Chapter 5
5. Application On-Line Documents – Refer to Chapter 6
7. Document Upload – Refer to Chapter 7
8. Independent Center Paper Only Documents (Submitted by Hard Copy) Refer to Chapter 8
9. Training Status – Refer Chapter 9
10. Submit Application – Refer Chapter 10
1. Login to CARES

For Login’s please refer to Chapter 2

Log On to CARES at NJ.Gov

Select – Login

Use your NJ.Gov/CARES login

Select NJCARES Hyperlink to access CARES

Once in CARES the user should select the Institution to bring the user to the Business Institution Page.
2. Review/Update Business Institution Page

Every year the Institution should Review and Update any changes to their Institution Page.

Institutions will need to make sure their SAMS Expire Date is current.

<table>
<thead>
<tr>
<th>Institution Business Maintenance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Business Information</strong></td>
</tr>
<tr>
<td>Institution Name: APPLE CORE</td>
</tr>
<tr>
<td>DUNS #:</td>
</tr>
<tr>
<td>SAMS Expire Date:</td>
</tr>
<tr>
<td>Tax Exempt Status:</td>
</tr>
<tr>
<td>Non Profit Center Sponsor</td>
</tr>
<tr>
<td>Federal ID:</td>
</tr>
<tr>
<td>New Jersey Vendor ID:</td>
</tr>
<tr>
<td>VS2556121230</td>
</tr>
<tr>
<td>Congressional District:</td>
</tr>
<tr>
<td>Status:</td>
</tr>
<tr>
<td>ACTIVE</td>
</tr>
<tr>
<td>Institution Fiscal Year End</td>
</tr>
<tr>
<td>Day: 30 • September</td>
</tr>
</tbody>
</table>

3. Review/Update Facility Maintenance

Every year the Institution should Review and Update any changes to each of their Facilities associated with CACFP.

Institutions will need to make sure they update License Expiration for each Facility

**NOTE:** If License is expired, Institution will not be able to receive reimbursement for that facility until new current expiration date is entered and License is uploaded to CARES.
4. Creating a New Application in CARES for a new Agreement year

User will select Applications from the **Institution Business Maintenance** screen to access the Applications checklist.

User will need to add a new application for the FY agreement year to the Agreement Grid to start new Application.

- User will need to enter agreement Fiscal Year
- Fiscal Start Date is always 10/01/FY
- Fiscal End Date is always 09/30/FY
- User should select Add New/Renewal Application Button

The new application will now display on the Application Grid, user can now choose select for that Agreement Year, to start the renewal process.
5. On-Line Documents for Sponsor of Centers/Independent Facility

There are 8 sections to On-Line Documents
1. Institution Management Plan – Sponsor Management Plan
2. Responsible Parties/Principals
3. Application Questionnaire
4. Institution Administrative Budget
5. Pre-Award Civil Rights Questionnaire
6. News Release
7. Permanent Agreement
8. Application for Center Facility Participation

The user will be required to complete and submit each section of the on-line documents, if not the user will not be able to submit a completed application.

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Started</th>
<th>Completed by Entity</th>
<th>Approved By NPS</th>
<th>Additional Info Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institution Management Plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsible Parties/Principals</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Application Questionnaire</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Institution Administrative Budget</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-Award Civil Rights Questionnaire (New Institutions Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>News Release (New Institutions Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permanent Agreement (includes policy statement) (New Institutions Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Application for Center Facility Participation</td>
<td></td>
<td>0 of 2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **Institution Management Plan** – Click on the Institution Management Plan hyperlink. This will bring up the Child and Adult Care Food Program Sponsor Management Plan form for the user to complete.

Each Agreement year the Institution will need to complete and submit the full Institution Management Plan - Sponsor Management Plan
*(Please keep in mind the training date for the program should be after June 1 and up to September 30 of that agreement year)*.

Once Submitted the User can Select Go to Next Checklist Form
2. **Responsible Parties/Principals – Institution need to complete Responsible Principals and Responsible Individuals.** Once an institution has completed a prior application, they will be able to Select **Copy Previous Year** button this will allow Responsible Parties/Principals to copy from agreement year to agreement year. The institution will be required to make any changes by selecting Edit/Delete or Add Parties to the form that may have change for the current agreement year. Once verified and changed the user can then Submit the form.

Once Submitted the User can Select Go to Next Checklist Form

3. **Application Questionnaire** - Each Agreement year the Institution will need to complete and submit the full Application Questionnaire Form.

Once Submitted the User can Select Go to Next Checklist Form.

4. **Institution Administrative Budget** - Each Agreement year the Institution will need to complete and submit the full Administrative Budget Form.

   *All Anticipated/Estimated Food Cost forms need to be complete before the user should submit the Budget form!*

Once Submitted the User can Select Go to Next Checklist Form

5. **Pre-Award Civil Rights Questionnaire** - Each Agreement year the Institution will need to complete and submit the full Pre-Award Civil Rights Questionnaire Form. (User will need to select SAVE then Next Page buttons to complete and submit the Form)

Once Submitted the User can Select Go to Next Checklist Form

6. **News Release** – News Release is only required for initial application.
   The user can select the Institution wishes to participate in state-wide public release check box for renewal, then select Submit.

Once Submitted the User can Select Go to Next Checklist Form
7. **Permanent Agreement** – Initial Agreement year the Institution will need to Accept Terms and Conditions once selected this will submit this form.

Once Submitted the User can Select Go to Next Checklist Form

8. **Application for Center Facility Participation** - Each Agreement year the Institution will need to create an Application agreement per Facility in CARES. All participating Facilities will need to have a completed Application for Participation form submitted to complete an application.

**Section 1 General** –
All Institutions need to review and verify. The user will need to Upload the current require documents (Refer to Upload List).

**License and Central Sanitation Certificate at minimum** will need to be current documents.

<table>
<thead>
<tr>
<th>Required Documents</th>
<th>Adult Care</th>
<th>Child Care</th>
<th>Emergency Shelter</th>
<th>At Risk</th>
<th>Family Day Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility 501(c)(3) Tax Exempt Status (If separate Legal Entity)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facility Organization Letter (If Facility Name different from License)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sponsor-Facility Agreement (Unaffiliated Facilities Only)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-Approval Visit Form (New Facilities Only)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Central Sanitation Certificate</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Health Inspection Report</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Fire Building Inspection Report</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Certificate of Occupancy</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance Zone Letter (At-Risk Facilities Only)</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Registration Certificate Home</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sample Menu</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sponsor Home Agreement (New Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Proof of Tiering Documentation - update as needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income Eligibility Statement - as needed as part of Tiering Documentation</td>
<td></td>
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</tr>
</tbody>
</table>

**UPLOAD FILE**

Choose File: No file chosen

Document Type: Facility 501(c)(3) Tax Exempt Status

Upload File

Return to Facility Application

Maximum File Size is 10mb. Attempting to Upload a Larger File Will Result In an Error.

<table>
<thead>
<tr>
<th>Documents on File</th>
<th>Column 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select</td>
<td>Delete</td>
</tr>
<tr>
<td>Select</td>
<td>Delete</td>
</tr>
</tbody>
</table>

No Deleted Documents on file.
Section 3 Operating Data and Revision-
Needs to be complete with all meal data or Institutions will not be able to receive reimbursement, for inaccurate information.

A. Age Range of Enrolled Participants
(Enter infants under 1 year as 0):
From   to   years old.

B. Licensed Capacity 50

C. Hours of Operation:
From   AM to   PM (hh:mm AM/PM)

D. Dates of Operation (mm/dd/yyyy). Start  End

E. Number of operating days per week? 5

F. Number of operating weeks per year? 52

G. Check all months in which the Child and Adult Care Food program will operate

- January
- February
- March
- April
- May
- June
- July
- August
- September
- October
- November
- December

H. Please add data for each meal served, including shift meals

<table>
<thead>
<tr>
<th>Meal</th>
<th>Lunch</th>
<th>Type</th>
<th>CC</th>
<th>Meal Time</th>
<th>MealName</th>
<th>MealNum</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12:00 PM</td>
<td>Breakfast</td>
<td></td>
</tr>
<tr>
<td>Delete</td>
<td>CC</td>
<td>08:00 AM</td>
<td></td>
<td>Breakfast</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Delete</td>
<td>CC</td>
<td>12:00 PM</td>
<td></td>
<td>Lunch</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

Section 4 – Ethnic/Racial Makeup
Needs to be completed each Application Year.
After all information is completed for this form the user can then Save and Submit the form.

The user should then select Return to Facility Listing and Select Next Facility for Submission. Once all Facilities are Submitted the user can then return to Checklist. An application cannot be submitted unless all Facilities have had a completed and submitted Application.

6. Review/Update Institution Document Upload
   Each Fiscal year an Institution will need to Review/Upload any documents that may be needed for the current Agreement. If an Institution does not need to upload a new document the Institution would need to check the Complete Checkbox next to the Institution Document on the Checklist to verify the document is valid for that agreement year.

   The user will not be able to submit an application until all required documents are checked on the Checklist.

   EX:

   Every year Institutions will need to upload:
   Sample Daily Menu
   Monitoring Schedule for Fiscal Year – (Sponsoring Institutions Only)
   Current Complete Monitoring Form – (Sponsoring Institutions Only)
   Proprietary Letter of Certification- Discloser of Ownership – (For-Profit Only)

   Needed if Changes to Contract or Expiration date
   Food Service or Small Contract – (If Applicable)

   Sanitation Certificate of Food Service Company (If Applicable)
7. Document Uploads Checklist

- 501 (c) 3 Tax Exempt Status
- Discloser of Ownership and Certificate of Incorporation
- Sponsoring Organization Letter
- W-9 Form/NJ Start
- ACH Electronic Funds Transfer
- Outside Employment Policy
- Monitoring Schedule
- Current Completed Monitoring Form
- Job Descriptions for CACFP (Monitor)
- Small Purchase Contract
- Food Service Management
- Sanitation Certification of Food Service Management Company
- Sample Daily Dated Menu with Agency Name

8. Independent Center Paper Only Documents (Submitted by Hard Copy)
   Each Agreement Year an Institution will need to verify that they have either submitted or have an onsite Eligibility Applications & Enrollment Records to do this the user will need to check the check box on the application for verification for Independent Center Paper Only Documents.

9. Training Status
   To be updated by the staff at CACFP and will not be needed by the User for submitting the application.

10. Submit Application
    Once the Application is complete on the checklist and required documents are submitted to CACFP the User will select Submit Application to NPS button.
Once the user has submitted the application for that Fiscal year, CARES will notify CACFP staff, that the institution application is complete for review. The User can login to the CARES to review the progress of the Application. If there are, any issues with the Application the User will be notified by their Specialist on how to complete any outstanding issues.