

## **ACD Online Claiming Program Disclaimer & Agreement**

Between the Provider enrolled on the Child and Adult Care Food Program (CACFP) and the Association for Child Development (ACD)

Provider Name:		ACD #:	
Street Address:			
City:	County:		Zip:
Phone:	Email: _		
Date of Birth:	License	License / License Exempt #:	
	Scannable	KidKare®	

I acknowledge that I have been provided with training materials for the use of the Minute Menu KidKare<sup>®</sup> internet claiming program and as of the date of this Agreement, the following will be my responsibility:

- 1. I will inform the Association for Child Development (ACD), in writing or via telephone, if I desire to discontinue using Minute Menu KidKare<sup>®</sup>.
- 2. Each month, before submitting my CACFP claim information to ACD, I will verify:
  - a. All new child enrollments have been finalized (i.e., a hard copy of a child enrollment form has been printed, reviewed, signed by you (the Provider), as well as the parent/guardian, and mailed to the ACD office).
  - b. All child sick days or days out of school have been entered.
  - c. Any days in the month when I have been closed have been clearly indicated (assuming I'm normally open on those days).
  - d. All meal and attendance information has been <u>accurately</u> entered on my computer.
- 3. On a daily basis, I will record my meal and attendance information. This information will be entered directly in my computer or logged manually on paper on a daily basis, and entered on the computer at least once per week.
  - a. Paper records must be maintained and accessible for the current year and three (3) previous years, in accordance with FNS Regulations 226.10 (d) and 226.18 (d), (e), and (g).

<sup>&</sup>quot;Educating parents and caregivers about nutrition to promote the development of children and establish healthy eating habits to last a lifetime."

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint\_filing\_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer. (Rev. 6/2013)

## **ACD Online Claiming Program Disclaimer & Agreement (Continued)**

- 4. If I cannot enter attendance and meals in my computer:
  - a. I will immediately notify ACD by telephone or email to await further instruction.
  - b. I understand that if I am unable to record my attendance and meals online that I am required to maintain a paper record of all meals and snacks that I serve. This requirement applies if technical difficulties are experienced with my computer for a period of more than 24 hours.
- 5. I understand that claiming online is a privilege. Failure to comply with the rules may result in being required to enter meals and attendance in my online menu daily. My menu can be set to be able to only log in meals by midnight of each day and any meals not recorded by that time will be disallowed unless I contact the ACD office in advance if I am experiencing technical issues.
- 6. I understand and acknowledge that I must contact the ACD Customer Service Department of any meal time(s) change. Furthermore, I understand that I may only request meal time changes once per month and that I must notify ACD PRIOR to the time and date that the new meal time(s) become effective. Failure to notify the ACD office will result in the deduction of any meals/snacks claimed.
- 7. Shall I choose to claim via scannable menu forms, by signing the ACD Online Claiming Program Disclaimer & Agreement allows me to choose to begin claiming online at any time during by sponsorship by ACD. This agreement also allows ACD to provide me with online technical assistance and access to Minute Menu KidKare<sup>®</sup>.

By signing below, I acknowledge that the meal and attendance information stored in the Minute Menu KidKare<sup>®</sup> system must be made available and printed immediately for review by any Association for Child Development (ACD), Illinois State Board of Education (ISBE) or United States Department of Agriculture (USDA) monitor; upon request.

I certify that the information entered into Minute Menu KidKare<sup>®</sup> is accurate in all respects. I understand that my login and password information is not to be shared with anyone other than approved ACD staff. I also understand that the information I enter into Minute Menu KidKare<sup>®</sup> is provided in connection with the receipt of federal funds and that deliberate misrepresentation may result in state or federal prosecution.

My signature on this document will serve in lieu of any monthly signature requirement for all Internet Claims submitted electronically to the Association for Child Development (ACD), thus verifying that all submitted menus and attendance are accurate.

I, the undersigned, certify that I will comply with the above information.

## **ACD Child Care Provider Signature**

Date

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