"SMART SNACKS" INDIVIDUAL EXEMPT FUNDRAISER CHECKLIST

Important notes

- This form should be approved by the principal or his/her designee, not the cafeteria staff.
- Post this form to the "Smart Snacks" Annual School-Based Exempt Fundraiser Summary Report.
- Retain this form at the school (not the cafeteria) for the current school year and the next three school years. These forms are subject to audit.

District and school: _____

Requesting school organization and contact: _____

Name of fundraiser, date(s), time(s), and location(s): _____

Description of food(s) being sold:_____

1. Is this fundraiser consistent with the district and/or school's **local wellness policies**?
   Yes = continue.
   No = STOP! This cannot be an exempt fundraiser.

2. Will the food be **sold**?
   Yes = continue.
   No = no exemption required, but check local wellness policy.

3. Will the food be sold during the **school day** for **consumption** on the **school campus**?
   Yes = continue.
   No = no exemption required, but check local wellness policy.

4. Will the food be sold in a **canteen, vending machine or school store**?
   Yes = STOP! This cannot be an exempt fundraiser.
   No = continue.

5. Does the food meet federal Smart Snacks **nutritional requirements**?
   Yes = no exemption required, but check local wellness policy.
   I don't know = use the Smart Snacks calculator at
   https://foodplanner.healthiergeneration.org/calculator/
   No = continue.

6. Will the food be sold in the **food service area** during breakfast and/or lunch?
   Yes = STOP! This cannot be an exempt fundraiser.
   No = Sign, date and submit this form to the principal or his/her designee.

_____

Printed name and signature of authorized organization representative Date

_____

Printed name and signature of principal or his/her designee Date