

**ORANGEBURG COUNTY SCHOOL DISTRICT
FOOD & NUTRITION SERVICES
AFTER SCHOOL SNACK PROGRAM AGREEMENT**

(Please fill out one after school snack agreement per campus program.)



- After the completed “After School Snack Program Agreement” is received at the School Nutrition Office, the Site Contact/Supervisor will be notified of the start date for snacks.
- The cafeteria manager cannot start a snack program unless authorization has been given from School Nutrition Office.
- Please provide a minimum of two weeks advance notice to program start and end dates. Please notify *Angela Robinson* with any change in program start and/or end dates.

Name of Organization: _____

School Name (Location of Program): _____

Site Supervisor/Contact Name: _____

Phone Number: _____ E-mail Address: _____

Type of Program: (Tutorial, Enrichment, etc.) _____

What time does the program start? _____

Program Start Date: _____ Program End Date: _____

What days are snacks needed? Check all that apply:

() Monday () Tuesday () Wednesday () Thursday () Friday

Number of Snacks Needed Daily: _____

Terms & Conditions

I have read the terms and conditions listed above and agree to comply with all of the guidelines. I understand that the After School Snack Program Agreement **requires a two-week advance notice** and must be approved before the program begins. **Please notify School Nutrition Office with any change in program start and/or end dates.**

Scan ASSP Agreement to email: angela.robinson@ocsdsc.org for approval.

Site Supervisor/Contact Signature _____ **Date** _____

Signature of District Food & Nutrition Coordinator _____ **Date** _____

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