Michigan Department of Education Office of Health and Nutrition Services



School Breakfast Program Expansion Grant Application

Main Menu

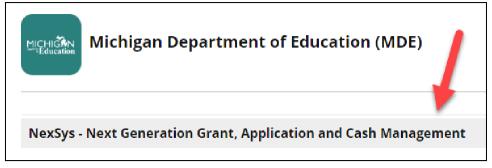
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Accessing the School Breakfast Program Expansion Grant Application

Log into <u>MILogin for Third Party</u>. MILogin can react differently with different browsers. It is recommended Google Chrome be used to complete this application.

Once you are on the home page, click NexSys – Next Generation Grant, Application and Cash Management



Select CNP: School Breakfast Expansion Grant from the available applications under "My Opportunities" on the NexSys Dashboard.

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ly Opportunities		* ×
CNP: School Breakfast Office of Health and Expansion Grant Nutrition Services	7/17/2022 12:00:00 AM - 7/18/2023 12:00:00 AM	

Once selected, a window with basic information about the application opportunity will display. Click "Proceed" to initiate the application. **Applications can only be initiated by a level 5 authorized user for the first year.**

Document Overview

Document Overview will show the process and status of the application. To return to this page later, click the "SBEG" document number at the top left of the application.



Cover Page

Click on the Cover Page located in the left tool bar.

SBEG-2023-	Document Overview							
✓ Forms	Template			Instance				
Cover Page 📃 🔲	CNP: School Breakfast Expansion	CNP: School Breakfast Expansion Grant						
	Document Name			Document Status Application In Prog	recc			
Assurances and Certifications				Your Role	1035			
	Organization			Authorized Official	(5)			
Important Information								
Review Grant Selections	0 -0-	-0-	-0-	-0-	-0-	_		
Sponsor/Site Information	Application In Application Progress Submitted	Review In Progress	Modifications Required	Modifications In Progress	Modifications Submitted	A Re		

Entity: Application Description is pre-filled from the Educational Entity Master (EEM). If this information is incorrect, update the organization profile in EEM.

For questions about EEM, email <u>CEPI@michigan.gov</u>.

Main Contact Person: select from the Contact Name drop-down Secondary Contact Person: select from the Contact Name drop-down Save the Page and the Main and Secondary Contact will populate.

Main Contact Person

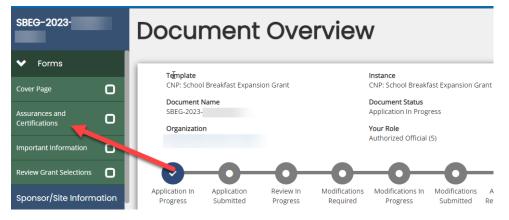
Main Contact Person

Contact Name		Contact Name		
Test OESAO	~	Test OESAO		~
Address		Address 123 Main St		
City	Zip Code	City Test City	Zip Code 48442	
Telephone	Fax	Telephone 517-555-1212	Fax	
Email Address		Email Address mlbutler369@gmail.com		



Assurances and Certifications

Click on Assurances and Certifications located in the left tool bar.



Review the Assurances and Certifications and save the page.

Important Information

Click on Important Information located in the left tool bar.

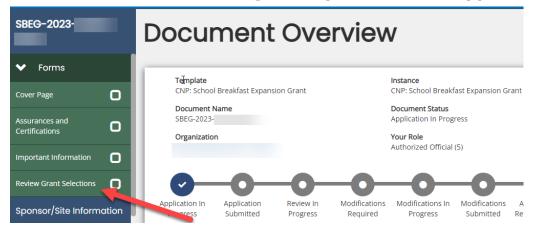
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Sponsor/Site Information	Application Progress Submitted	Review In Progress	Modifications Required	Modifications In Progress	Modifications Submitted	A Re			

Review the Important Information and save the page.

Review Grant Selections

Click on Review Grant Selections located in the left tool bar.





Save the page and the Budget Pages will appear in the left tool bar.

Sponsor Information/Contacts

Click on Sponsor Information/Contacts located in the left tool bar.

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Sponsor/Site Information	Application In Progress	Application Submitted	Review In Progress	Modifications Required	Modifications In Progress	Modifications Submitted	A Rev
Sponsor Information/Contacts							
Site Information							
Budget							

Numbers 1-4 are pre-filled from the Educational Entity Master (EEM). If this information is incorrect, update the organization profile in EEM.

For questions about EEM, email <u>CEPI@michigan.gov</u>.

Financial Director/Business Manager: enter the name, phone number and email address

Food Service Director: enter the name, phone number and email address

Superintendent: information is pre-filled from EEM.

Check the box at the bottom of the page to certify the information is complete and correct and save the page.



Site Information

Click on Site Information located in the left tool bar.

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Assurances and	Document SBEG-2023				Document Status Application In Prog	ress	
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Important Information							
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Sponsor/Site Information	Application In Progress	Application Submitted	Review In Progress	Modifications Required	Modifications In Progress	Modifications Submitted	A Rev
Sponsor Information/Contacts							
Site Information							
Budget							

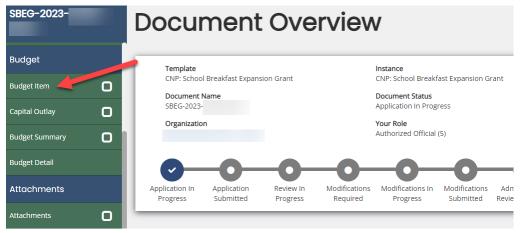
Answer questions 1-5.

- Question 1 refers to what activities you plan to use the grant funds for. Select what activities you plan to fund and describe each.
- Question 2 refers to alternative breakfast program models that will be implemented or expanded using the grant funds.
- Question 3 needs to be completed if an alternative breakfast program model will be expanded or implemented.
- Question 4, answer yes or no if you are participating in the Team Nutrition E-Start Grant.
- Question 5, answer yes or no if you are a grantee in the 10 Cents a Meal Program.
- Lastly, check the box that you agree to complete the grant fund evaluation by September 30, 2023.

Budget Item

Click on Budget Item located in the left tool bar.





The Function Code for the budget items is 297: Food Services and should be displayed on the drop-down menu.

Provide a detailed description of what you will be using the grant funds for. i.e., smoothie maker. Instead write "purchase 4 smoothie makers (list brand and model) for each elementary school (list schools)".

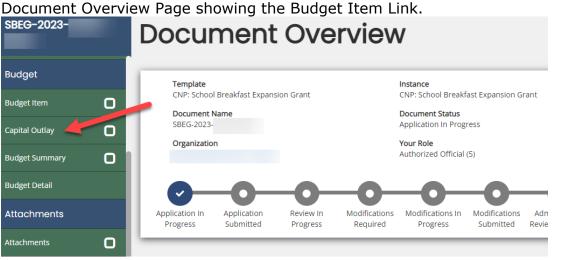
Enter the cost with each budget item in the appropriate budget category.

If you are funding staff salary, then benefits must also have a dollar amount. You will see an error message if you do not include both.

Save the page.

If adding more than one budget item, click the "Add" button in the upper right corner and complete as necessary.

Budget items should total \$10,000. This includes Capital Outlay. Grant funds cannot exceed this amount.



Capital Outlay

The Function Code for the budget items is 297: Food Services and should be



displayed on the drop-down menu.

Provide a detailed description of the capital outlay item you plan to purchase. Enter the justification for the capital outlay item. Enter how many items you plan to purchase and the cost for the item.

Capital Outlay is specifically for individual items over \$5,000 (think larger equipment purchases).

Save the page.

If adding more than one capital outlay item, click the "Add" button in the upper right corner and complete as necessary.

Budget Summary

Click on Budget Summary located in the left tool bar.

SBEG-2023-	Docur	ment	Ove	rview	/		
Budget	Template				Instance		
Budget Item	CNP: School	Breakfast Expans	sion Grant		CNP: School Breakf	ast Expansion Gr	ant
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Capital Outlay					Application In Prog	1622	
Budget Summary	Organization	1			Your Role Authorized Official	(5)	
Budget Detail	—	-0-	-0-	-0-	-0-	-0-	
Attachments	Application In Progress	Application Submitted	Review In Progress	Modifications Required	Modifications In Progress	Modifications Submitted	Adn Revie
Attachments							-

Budget information entered on the Budget Detail and Capital Outlay pages will display in the appropriate categories. Again, the total Budget amount cannot exceed \$10,000.

Enter the Business Office Representative, their phone and email.

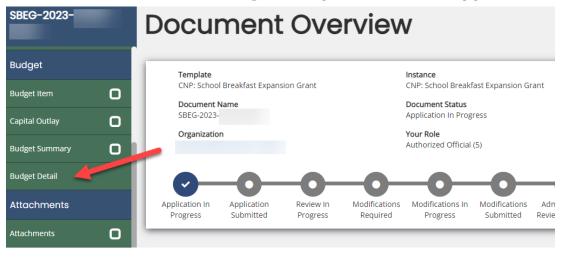
Enter the Contact Person, phone and email.

Save the page.

Budget Detail

Click on Budget Detail located in left tool bar.

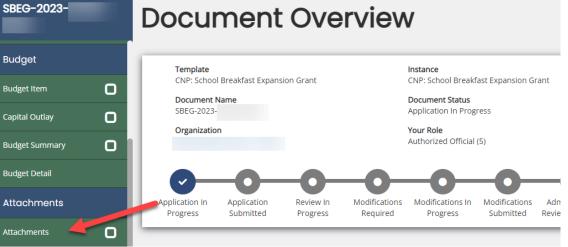




This page shows a detailed list of the grant budget that is exportable.

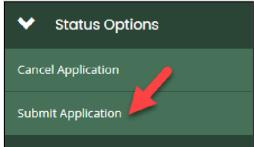
Attachments

Click on Attachments located in the left tool bar if you want to upload attachments into the application. Attachments are not required for this application.



Application Process Flow

Once all sections in the application have been completed, click submit application.





If there are any errors in the application, they will appear on this page. To go directly to that error, select the form name.

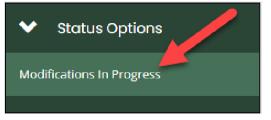
alidation	×
lect the form name to navigate and make changes to any of the forms.	
st	
Status	May Prevent Status Change
Form is required and has not been saved	Yes
Form is required and has not been saved	Yes
	ect the form name to navigate and make changes to any of the forms. st Status Form is required and has not been saved

Once the application is free of errors, complete the certification page to submit application.

		×
Are you sure that you want to change the status from Application in Progress to Submit Application?		
I, 1), certify:		
 The information submitted in this application is true and correct to the hest of my knowledge; and That the Entity will comply with the Assurances and Certifications contained within this application; and The budget was prepared cooperatively by individuals from both the Program and Business Office. 		
If you are not Test OESAO you should click "Cancel" and return to the Home page. Floase enter any notes in regards to this status change		_ /
	Cancel	ОК

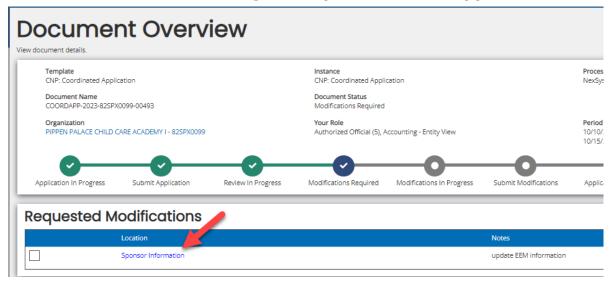
Returned for Modifications

If modifications are required for approval, please complete all requested changes. To do this, click Modifications in Progress on the left tool bar.



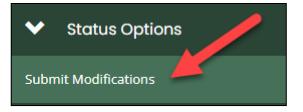
The requested modifications will be displayed on the Document Overview page. This can be accessed by clicking the Application Number on the top left tool bar.





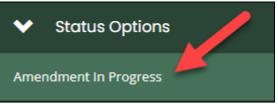
Click on the page name to go directly to that page to make modifications.

Once modifications are complete, click Submit Modifications on left tool bar.

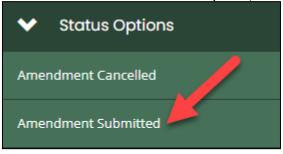


Amend Application

To amend an approved application, click Amendment in Progress on the left tool bar.



Once amendments are complete, click Amendment Submitted on the left tool bar.



Final Steps



You will receive an email including an award notification letter if you are awarded grant funds. You can check the status of your application anytime by following the above steps in NexSys, then clicking on the CNP: School Breakfast Expansion Grant.

Please contact Sara Harmon with any application or grant questions. You can email <u>MDE-SchoolNutrition@michigan.gov</u> or call 517-241-5374.