**FILE: EFE-E(1)**

**“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.

* 1. Will the food be **sold**?

Yes = continue.

No = no exemption required, but check local wellness policy.

* 1. 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.

* 1. Will the food be sold in a **canteen, vending machine or school store**?

Yes = STOP! This cannot be an exempt fundraiser.

No = continue.

* 1. 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.

* 1. 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