## **TIER NOTIFICATION FORM**

Provider Name	Date
Provider Address:	
<i>Instructions:</i> CACFP tier determination is marked in the appropriate column. Please complete and sign both forms. Return one form to the sponsoring organization and keep the other on file.	
TIER 1	or TIER 2
Your day care home has been determined to be Tier 1 due to one of the following:  School <sup>1</sup>	Your day care home has been determined to be Tier 2 because it is not located in an eligible area and it has not been determined eligible by income. As a Tier 2 provider, you must select one of the following options:
Qualifying School:  Free/Reduced Percentage:  Effective:  Expires:	I choose to receive Tier 2 reimbursement for meals served to all children in my care. <sup>2</sup>
Census¹ Census Block Number: Effective: Expires:	□ I request the sponsoring organization to collect income forms from <u>ALL</u> families who have children in my care. Meals will be reimbursed at Tier 1 rates for eligible children and Tier 2 rates for all other children. <sup>2</sup>
Census averaging used: Y N  Household Income  Effective:  Expires:	I will provide documentation to the sponsoring organization for children who are eligible for DCF child care subsidies. Meals will be reimbursed at Tier 1 rates for eligible children and Tier 2 rates for all other children. <sup>2</sup>
Meals will be reimbursed at Tier 1 rates for children in care. I understand the method of determination and the rates at which meals will be reimbursed.	I understand the method of determination and the rates at which meals will be reimbursed.
Signature of Provider Date	Signature of Provider Date

<sup>&</sup>lt;sup>1</sup>Providers who are Tier 1 by School/Census may only claim their own children if eligible by household income.

<sup>&</sup>lt;sup>2</sup>Tier 2 provider's own children cannot be claimed for reimbursement in the CACFP.