Smoothie Grant Application

This application is for adding smoothies made with real dairy on your menu, if you would like to start or expand a child nutrition program, please see our School Meals Application on our [website](#).

This grant opportunity is available to school districts who are interested in providing new dairy options with their school meals. Funding is competitive and will be awarded based on strength of plan and potential impact. Schools with low enrollment, low free/reduced enrollment, and/or high budgets if approved may not receive full funding request. If approved, the proposal described in this Funding Application is subject to modification by New England Dairy & Food Council. Modifications will be communicated electronically to the school district. This funding Application, including any modifications communicated by New England Dairy & Food Council, will be incorporated into a Letter of Agreement to be signed by New England Dairy & Food Council, the school nutrition director and school district official, and will govern the terms of the funding.

These grants are made possible by the dairy farm families of New England. Proposals should increase access to school meals and promote dairy sales. Incomplete applications and those with vague answers will not be considered for funding.

If approved, you must provide baseline data before funding is distributed. Schools that receive funding must submit pictures and complete all follow up reporting for their new program. Delinquent schools will not be considered for future funding.

District Information

District Name: _____

Which milk processor do you use? _____

Director Name: _____

Director Phone: _____ -

Director Email: _____

Applicant Name: _____

Applicant Phone: _____

Applicant Email: _____

Social Media Handles: _____

Where should your check be sent? (Name & Address):

_____

_____

_____

☐ **Check this box if your school district can accept electronically transferred funds.**

☐ **Check box if you want the equipment sent to the address listed above.**

Program Proposal

Provide a detailed plan for how you plan to serve the above-mentioned menu option to your students. Explain how each item in your budget will be used to carry out this plan? (Limit 250 words)

[ ]

Check off each marketing strategy you plan to use to promote your new smoothie program (can check more than one):

- ☐ Have smoothie taste testing to introduce new flavors and build excitement around program.
- ☐ Have students ["Name a Smoothie"](#) award prizes and put your favorite name on the menu.
- ☐ Use our smoothie club cards, and rewards students who purchase 10 smoothie meals.
- ☐ Host a "smoothie blend-off" contest. Check out our [blend off guide](#) to learn more.
- ☐ Spread the word about your smoothies using our [social media sample posts](#)

School Information & Budget: (Each school must have a separate budget.)

School Name:_____   Free & Reduced Percent: _____

Enrollment: _____   List milk flavors and fat levels offered:_____

Start Date (Date at least two months after submission) _____

Current average daily meals served during each occasion?

Breakfast: _____   Lunch: _____   After-school Meals/Snacks: _____

Current total average number of milks served each day for all meal occasions: _____

How many ounces of milk and/or yogurt will be included per serving in your new dairy program ?

  Milk: _____   Yogurt: _____

  How many times a week do you plan to menu this item? _____

  How many of this menu item do you anticipate serving each time it is on the menu? _____

How many **additional** meals do you plan to serve per day once the changes go into effect?

  Breakfast: _____   Lunch: _____   After-school Meals/Snacks: _____

If you are applying for a smoothie grant, please select **two** smoothie signs to help market the program.
Countertop: [ ]   Freestanding banner: [ ]   Wall/Ceiling mount: [ ]

NOTE: Funds cannot be used to purchase food, except for taste testing of a new item and recipe contests. If you select one of the turn-key kits, no additional equipment funding will be provided.

EXPENSE CATEGORIES (Not all required)	Please list total amount needed for Expense Category	Please provide detailed, itemized expense explanation
Foodservice equipment (commercial grade equipment, include shipping) [ ] Turn-key Smoothie Kit (Value $790)	Leave blank if requesting smoothie equipment kit.	
Student engagement (taste tests, recipe contests, participation incentives, etc.): *Max $.20 per student*	$	
Total amount requested:	$	

Please rate your administrator's level of support for this program. (Check 1,2 or 3)
  [ ] 1—They are open to trying the program.
  [ ] 2--They are supportive of the program.
  [ ] 3—They are supportive and will do everything to make it successful.

Continue to next page for next school.

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If you are applying for more than four schools, email dairygrants@newenglanddairy.com for a custom application.