



## SNAP-Ed Site Change Form

[NOTE: Please download and use only the most current SNAP-Ed Site Change Form when submitting to California Department of Social Services (CDSS). Failure to do so could result in it being returned for resubmission.]

Section A. Local Implementing Agency (LIA) Site Notification: Add      Delete      Change	
(1) County Jurisdiction:	
(2) Name of LIA initiating site change (i.e.: CDPH LHD; UCCE, etc.):	
(3) Primary Contact Name:	(4) Primary Contact Phone Number:
(5) Name of all SNAP-Ed LIA Partners within County Jurisdiction: N/A <input type="checkbox"/> [Check only if there are no other SNAP-Ed LIA Partners within County Jurisdiction]	(6) Consensus on Site Change(s) Reached and Approved by SNAP-Ed Partners <i>(Required)</i>
1. <input type="checkbox"/>	Yes <input type="checkbox"/>
2. <input type="checkbox"/>	Yes <input type="checkbox"/>
3. <input type="checkbox"/>	Yes <input type="checkbox"/>
4. <input type="checkbox"/>	Yes <input type="checkbox"/>
(7) LIA requesting change has contacted and received technical assistance from State Implementing Agency (SIA) Contact. Yes <input type="checkbox"/> <i>(Required)</i>	(8) SIA has verified all forms and attachments and Provided TA to the LIA. Yes <input type="checkbox"/> <i>(Required)</i>
(9) Additional Information (if applicable, may attach a separate sheet):	
(10) SNAP-Ed Work Plan Targeting Summary Update Spreadsheet Completed and Attached <input type="checkbox"/> <i>(Required)</i>	
<b>FOR CDSS SITE CHANGE COORDINATOR ONLY:</b> Date received:                      Date Completed: Additional information needed: Yes <input type="checkbox"/> No <input type="checkbox"/> Information Needed: If additional information needed, Date requested:	

Section B. Request to Use a New Alternative Site Methodology: Single Event <input type="checkbox"/> On-going Services <input type="checkbox"/>	
(1) Please specify site location and address:	
(2) Alternative Methodology Used: (Please specify the methodology # used based on the <a href="#">USDA/WRO Targeting Methodologies Summary</a> ) Methodology #	
(3) Describe and justify the new "Alternative Methodology" (Provide documentation on a separate attachment if needed as part of the justification)	(4) SIA consulted by initiating LIA regarding the use of an alternative method for this site? Yes <input type="checkbox"/> <i>(Required)</i>
(5) SNAP-Ed Work Plan Targeting Summary Update Spreadsheet Completed and Attached <input type="checkbox"/> <i>(Required)</i>	
<b>FOR CDSS SITE CHANGE COORDINATOR ONLY:</b> Date received:                      Date Completed: Alternative Methodology Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Additional information needed: Yes <input type="checkbox"/> No <input type="checkbox"/> Information Needed: If additional information needed, Date requested:	

**Note: May 1, 2015, is the deadline to submit all site change requests for FFY 2015 to CDSS.**

## Instructions on how to fill out the form

### Section A. Local Implementing Agency [Must be completed for all submissions]

- 1) Check the box that signifies the type of site change completed through this form under Section A. Heading. If multiple changes are being made, check all that apply. Complete Section A thoroughly as noted below:
  - 1-4 Include the County Jurisdiction, LIA(s) initiating the site change and primary contact information.
  - 5 Include names of all SNAP-Ed LIA partners within the County Jurisdiction. Check the "N/A" box only if there are no other SNAP-Ed LIA Partners within County Jurisdiction.
  - 6 Check the "yes" box(s) to signify that consensus has been reached by each of the LIAs; each LIA should verify the targeting spreadsheet and form(s) being sent in. *(Required)*
  - 7 Check the "yes" box to signify that the SIA has been contacted and technical assistance has been given regarding site change(s). *(Required)*
  - 8 **For SIA ONLY:** Check the "yes" box to signify that the all forms and attachment(s) being sent into CDSS were verified and technical assistance has been given by SIA representative regarding site change(s). *(Required)*
  - 9 Any additional information the LIA feels is appropriate to this site change request should be included under Section A.
  - 10 Check the box that signifies you have completed and attached the required **SNAP-Ed Work Plan Targeting Summary Update Spreadsheet**. **All forms must be attached prior to submission to the CDSS Site Change Coordinator.** *(Required)*
- 2) The CDSS Site Change Coordinator will review all documents received through the [CalFreshSNAP-Ed@dss.ca.gov](mailto:CalFreshSNAP-Ed@dss.ca.gov) email box and complete the bottom portion of Section A once that process is completed.
- 3) **Note:** If you are proposing a new alternative methodology for qualifying your site, **Section B** must also be completed and submitted along with **Section A** as part of this process and prior to emailing the CDSS Site Change Coordinator.

### Section B. Site Request to Use a NEW Alternative Site Method

**Note: Section B only required for agencies requesting CDSS to review and approve an Alternative Site Qualification Method.**

*"Alternative Qualifying Sites" sites require a "case by case" review if they warrant qualification based on additional criteria other than CDE FRPM or Census information. Strong justification for approval must be included in this request. The LIA cannot use the intervention site for SNAP-Ed until after approval is received. No provisional approval is allowed for alternative targeting sites.*

- 1) Check the box that indicates whether this request is for a **single event** or **on-going** intervention site under Section B. Heading. Complete Section B thoroughly as noted below:
  - 1 Please specify the site location and address information for which the alternative site method will be utilized under Section B.1.
  - 2 Specify the number of the type of alternative methodology used for qualifying this site on Section B.2 based on the "USDA/WRO Targeting Methodologies Summary". Include justification for the "Alternative Methodology" noted under Section B.3. This information is required for each site requested through this form under Section B.
  - 3 Describe and justify the alternative methodology used to qualify site under Section B.3. Please be specific and attach documentation if needed as part of the justification. It must include the name, address and type of intervention along with details of how interventions at this site will reach 50 percent or greater of the population at or below 185% of the federal poverty level. Include whether it is for a single event or on-going intervention site. Include in the justification why no other site can be used for the intervention and how it relates to the overall work plan.
  - 4 Check the "yes" box to signify that the SIA has been consulted regarding the use of the alternative method noted under Section B.3. *(Required)*
  - 5 Check the box that signifies you have completed and attached the required **SNAP-Ed Work Plan Targeting Summary Update Spreadsheet**. *(Required)* If further documentation is required to describe or justify the alternative methodology, that should be provided as well as a separate attachment. **All forms must be attached prior to submission to the CDSS Site Change Coordinator.**
- 2) For agencies requesting review and approval on the use of an alternative site qualification method, the CDSS Site Change Coordinator will review all documents received through the [CalFreshSNAP-Ed@dss.ca.gov](mailto:CalFreshSNAP-Ed@dss.ca.gov) email box and complete the bottom portion of Section B once that process is completed.

### Emailing Instructions

Once **Section A** and **Section B** (if applicable) are completed, attach the **SNAP-Ed Site Change Form** and the completed **SNAP-Ed Work Plan Targeting Summary Update Spreadsheet** in an email addressed to the CDSS Site Change Coordinator at [CalFreshSNAP-Ed@dss.ca.gov](mailto:CalFreshSNAP-Ed@dss.ca.gov). Be sure to "cc" ALL SNAP-Ed Implementing Agency Partners (both SIA and LIA), and Work Plan Coordinators within the county jurisdiction in this email (refer to current contact lists at links noted below). When emailing to the CDSS Site Change Coordinator, include the following information on the email heading as follows:

#### Email Heading:

**From:** Name of Initiating LIA County Contact  
**To:** CDSS Site Change Coordinator [ [CalFreshSNAP-Ed@dss.ca.gov](mailto:CalFreshSNAP-Ed@dss.ca.gov) ]  
**Cc:** All SNAP-Ed Implementing Agency Partners within the county jurisdiction [Refer to [SNAP-Ed Implementing Agencies List \(January 2015\)](#) for current partners]; and County Work Plan Coordinator within the county jurisdiction [Refer to [County Work Plan Coordinators](#) list]  
**Subject:** Site Change Notification: (County Name) [If completing Section A only] or Site Change Notification/Alternative Site Method Request: (County Name) [If completing Section A and Section B]

### Form Submission Due Date

CDSS will only process SNAP-Ed Site Change Forms and attachments **the first of each month**. Please send all SNAP-Ed Site Change Forms and attachments to CDSS electronically by COB on the first business day of each month for processing Any SNAP-Ed Site Change Forms received after the due date of the first of each month, will not be processed until the following month's due date.