

**Verification Collection Report (VCR)**  
**Submit through Online Services Portal by February 1**

<b>Section 1 Schools and RCCIs</b>	<b>A. Number of schools</b>	<b>B. Number of Students</b>
1-1 Total Schools		
1-2: Total Residential Child Care Institutions (RCCIs)		
1-2a: RCCIs with day students		
1-2b: RCCIs with NO day students		
<b>Section 2 Special Provision Schools Data</b>	<b>A. Number of schools</b>	<b>B. Number of Students</b>
<b>Provision 2 schools only</b>		
2-1: Operating Provision 2 in a BASE year		
2-2: Operating Provision 2 in a NON BASE year		
2-2a: Provision 2 students reported as FREE in a NON BASE year		
2-2b: Provision 2 students reported as REDUCED PRICE in a NON BASE year		
<b>Community Eligibility Provision (CEP) schools only</b>		
2-3: Operating the Community Eligibility Provision		
<b>Not Applicable in Wisconsin</b>		
2-4: Operating other alternatives for NSLP and SBP	n/a	n/a
2-5: Operating an alternate provision(s) for only SBP or only NSLP	n/a	n/a
<b>Section 3 Direct Certification Data</b>		
3-1: Check this box only if all schools and/or RCCIs in the SFA were not required to perform direct certification.		
		<b>B. Number of FREE Students</b>
3-2: Students Directly Certified with FoodShare (SNAP), include students receiving extension of benefits. <b>Only report S and O codes here.</b>		
3-3: Students directly certified through other programs: T, E, G, and M direct certification codes, DO NOT report Z codes here. Students documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant approved by local officials. Do NOT report S and O codes on this line. Include any students receiving extension of benefits here.		
3-4: Students certified categorically FREE eligible through SNAP letter method.		n/a
<i><b>The following direct certification data request is a special request for SY 2019-20 and is required for Federal reporting for the Medicaid Demonstration Project. Please report the number of students that matched by the direct certification eligibility code indicated on each line as of the last operating day in October. This data is in addition and separate from the numbers reported in boxes 3-2 and 3-3. Please note: this data will NOT pull into the T-1 Total FREE or T-2 Total REDUCED students at the end of section 4.</b></i>		<b>B. Number of Students</b>
1. Students directly certified through FoodShare (SNAP) for FREE meals (S code)		
2. Students directly certified through FoodShare(SNAP) and W-2 Cash Benefits for FREE meals (O code)		
3. Students directly certified through Cash Benefits (TANF) for FREE meals (T code)		
4. Students directly certified through Medicaid for FREE meals (M code)		
5. Students directly certified through documentation from Other programs (e.g. homeless, migrant, runaway, foster, Head Start and all other FREE DC codes:		
6. Students directly certified through Medicaid for REDUCED PRICE meals (Z code):		

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<b>Section 4 Free and Reduced Applications</b>	<b>A. Number of Applications</b>	<b>B. Number of Students</b>
4-1: Approved as categorically FREE Eligible: Based on providing a case number for FoodShare, W-2 Cash Benefits or FDPIR on an application (Not on DC list)		
4-2: Approved as FREE eligible: Based on household size and income information		
4-3: Approved as REDUCED PRICE eligible: Based on household size and income information		
<b>Section 5 Outcome of the Verification Process</b>		
5-1: Check this box if ALL schools and/or RCCIs are exempt from verification (see instructions for list of exemptions). If 5-1 is checked, no further reporting in section 5 is required.		
<b>5-2: Was verification performed and completed?</b>	<b>Check one box</b>	
1. Yes, completed by November 15th		
2. Yes, Completed after November 15th		
3. No, verification was NOT performed or the process was not completed		
<b>5-3: Type of Verification Process used:</b>	<b>Check one box</b>	
1. Standard (3% selected from error-prone applications)		
2. Alternate one (3% selected randomly)		
3. Alternate two: (1% error prone applications PLUS 1/2 percent of applications with a case number)		
5-4: Total Error Prone Applications (must report if 1 or 3 is selected in 5-3)		
5-5: Number of applications selected for verification		
5-6: Check this box if direct verification was NOT conducted. If 5-6 is selected, skip 5-7. (Note, this is NOT direct certification)		
	<b>A. Number of Applications</b>	<b>B. Number of Students</b>
5-7: Answer only if direct verification is completed (leave blank if 5-6 is checked)		
<b>5-8: Results of Verification Process</b>	<b>A. Number of Applications</b>	<b>B. Number of Students</b>
<b>A: FREE-Categorically Eligible (case number provided on application)</b>		
1. Responded, NO CHANGE		
2. Responded, Changed to REDUCED PRICE		
3. Responded, Changed to PAID		
4. NOT Responded, Changed to PAID		
<b>B. FREE - Income Certified as FREE based on income/household size application</b>		
1. Responded, NO CHANGE		
2. Responded, Changed to REDUCED PRICE		
3. Responded, Changed to PAID		
4. NOT Responded, Changed to PAID		
<b>C. REDUCED PRICE - Income Certified as REDUCED PRICE based on income/household size application</b>		
1. Responded, NO CHANGE		
2. Responded, Changed to FREE		
3. Responded, Changed to PAID		
4. NOT Responded, Changed to PAID		
<b>VC-1: Total questionable applications verified for cause in addition to the verification requirement. (Outcome of this process also needs to be included in section 5-8). Leave blank or put zero if no questionable apps were verified for cause.</b>	<b>A. Number of Applications</b>	