

School/District Information		
School Name:		Grades Served:
Person Completing Application:		Title:
Phone Number:		Summer Contact Number:
Address (include city, state, zip):		
Email:		
Enrollment 2025-26:	Breakfast ADP 2025-26:	Lunch ADP 2025-26:
If awarded, check made payable to:		
District Name:		
District Nutrition Director:		
Phone Number:		Email
Address (include city, state, zip)		

Funding Request	
Amount Requested:	Implementation Date*: <small>*Program must begin by September 30, 2026</small>
What program will the funds support? <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Both <input type="checkbox"/> Other	
How will the funds be used? (Check all that apply)	
<input type="checkbox"/> Breakfast in the Classroom <input type="checkbox"/> Grab and Go Breakfast <input type="checkbox"/> 2 <sup>nd</sup> Chance Breakfast <input type="checkbox"/> Breakfast Promotion <input type="checkbox"/> Smoothies <input type="checkbox"/> Equipment to promote dairy <input type="checkbox"/> Other	
Is this a new program or an expansion of a current program?	
How many students will be directly impacted by the proposed program?	
Provide an explanation of your proposed plan/program. Be as detailed as possible.	
What will change as a result of this program? How will you measure the specific outcomes and overall effectiveness of your program?	

Describe if and how you will continue the program beyond the 26-27 school year?

Do you have or have you applied for additional sources of funding for the proposed plan? Have you received other nutrition grants this year? If so, please name the funding organization(s) and amount(s) requested and/or received.

No

### Budget

Foodservice Equipment*	Amount	Detailed Explanation
Student Engagement/Incentives		
Marketing (signage, materials)		
Other, explain		
Total Amount Requested (up to \$2000)		

\* A quote for items over \$250 from an equipment vendor must accompany this application.

### Agreement and Signature

*I agree on behalf of my school that the above information is true and complete.*

School Nutrition Director Printed Name	Signature	Date
Principal/Administrator's Printed Name	Signature	Date

**Deadline:** To be considered for funding, the completed Dollars for Dairy Application, including an equipment quote, and Letter of Agreement must be submitted by June 1, 2026. Submit forms via:

- **Email:** [info@stldairycouncil.org](mailto:info@stldairycouncil.org)
- **Fax:** 314-835-9969
- **Mail:** 325 N. Kirkwood Rd., suite 222, St. Louis MO 63122



## DOLLARS FOR DAIRY

LETTER OF AGREEMENT BETWEEN  
St. Louis District Dairy Council  
AND

School/School District:	
School District Contact:	
Phone Number:	
Email Address:	

### **BASIC PROVISIONS OF LETTER OF AGREEMENT**

**St. Louis District Dairy Council (SLDDC) agrees to assume the following responsibilities:**

1. Provide funds to help implement the agreed upon strategy(s) to increase access to and consumption of dairy products at school breakfast and/or school lunch.
2. Work with the district as needed to maximize the success of the agreed upon strategy(s).
3. Assist in identifying local resources that may support the strategy(s).

**As the grant recipient, I agree to assume the following responsibilities:**

1. Implement the agreed upon strategy(s), as described in the Dollars for Dairy Funding Application, to increase access to and consumption of dairy products within the school environment.
2. Purchase agreed-upon equipment within 30 days of receipt of funds, submit receipts, and initiate the agreed upon strategy(s) no later than September 30, 2026. If, for any reason, the purchase and start date cannot be met, St. Louis District Dairy Council will be contacted prior to September 30, 2026. Return of funds to SLDDC may be required in the event a mutually agreed upon amended timeline is not established.
3. Cash/deposit the check issued within 90 days of receipt. Failure to do so may result in the stop payment of the check.
4. Continue the agreed upon strategy(s) for the duration of the 2026-2027 school year.
5. Work with key stakeholders and students (principals/administrators, teachers, custodians, parents, and/or student groups) to support the school involved in the agreed upon strategy(s).
6. If equipment is purchased with funds from this grant, equipment must be used for the agreed upon strategy and must showcase dairy products, such as white or flavored milk, yogurt, or cheese. Equipment becomes the property of the school and the school is responsible for all maintenance and service.
7. Complete all required qualitative and quantitative reporting and evaluation components on the use and impact of the funds using the forms provided by SLDDC and according to the timeline provided by SLDDC.
8. Allow two (2) site visits by SLDDC staff to observe/monitor plan progress and to review data reporting forms. Visits will be scheduled on mutually agreed-upon dates within the 2026-2027 school year.
9. Submit at least 3 photos taken of the strategy implementation and/or events that were part of the program (within school regulations) for use in promotional and informational materials.

**I understand this Letter of Agreement must be signed and returned to St. Louis District Dairy Council before any funds will be awarded. I also understand that the failure to implement the agreed upon strategy(s) may result in the mandatory return of funds or equipment purchased with grant funds, at the discretion of St. Louis District Dairy Council.**

School Nutrition Director Printed Name	Signature	Date
Principal/Administrator Printed Name	Signature	Date
St. Louis District Dairy Council Printed Name	Signature	Date