

# PASSWORD VERIFICATION AND REQUEST FORM

## CNP On Line Application/Claim System

Child Nutrition Programs  
VT Department of Education  
120 State St.  
Montpelier, VT 05620

<b>LEA#</b>	<b>SFA</b>	<b>School Year</b>
-------------	------------	--------------------

**Authorized SIGNER:** has access to the On Line Child Nutrition Programs Application/Claim System and the authority and security rights to complete, **sign and submit** Applications and Agreements, and Claims for Reimbursement. By law, representatives of food service management companies cannot be given rights of an authorized signer.

**Authorized USER:** has access to the On Line Child Nutrition Programs Application/Claim System and the authority and security rights to complete Applications and Agreements, and Claims for Reimbursement, but does not have the authority and security rights to sign and submit these documents. Representatives of food service management companies can be given the rights of an authorized user.

**CURRENT INFORMATION:**

<p><b>List Current Authorized SIGNER(S):</b> Log on to CNP On Line, click on "Applications," then select "Authorized Signers."</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p>	<p><b>List Current Authorized USER(S):</b> There should be a list of Authorized Users on file at the School Food Authority.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
--	---

Please check this box if there are **NO CHANGES** to either list above and **NO ADDITIONS** requested below.

To **REMOVE** an Authorized Signer or Authorized User, draw a line through the appropriate name ABOVE.

To **ADD** an Authorized Signer and/or Authorized User, complete the appropriate column(s) BELOW.

**New Authorized SIGNER(S)**

<b>1.</b>	Print Name
	Position/Title
	e-mail <span style="float: right;">Phone</span>
	Signature
	User name (state use only) <span style="float: right;">password(state use only)</span>

  

<b>2.</b>	Print Name
	Position/Title
	e-mail <span style="float: right;">Phone</span>
	Signature
	User name (state use only) <span style="float: right;">password(state use only)</span>

**New Authorized USER(S)**

<b>1.</b>	Print Name
	Position/Title
	e-mail <span style="float: right;">Phone</span>
	Signature
	User Name (state use only) <span style="float: right;">Password (state use only)</span>

  

<b>2.</b>	Print Name
	Position/Title
	e-mail <span style="float: right;">Phone</span>
	Signature
	User name (state use only) <span style="float: right;">password(state use only)</span>

SFA Administrator Signature	Position	Date
-----------------------------	----------	------