

STATE OF NEW MEXICO PUBLIC EDUCATION DEPARTMENT 300 DON GASPAR SANTA FE, NEW MEXICO 87501-2786 Telephone (505) 827-5800 www.ped.state.nm.us

DR. VERONICA C. GARCÍA SECRETARY OF EDUCATION

BILL RICHARDSON Governor

Attachment A



School Year (SY): 2009-2010

The Fresh Fruit and Vegetable Program (FFVP) Grant Application Food, Conservation and Energy Act of 2008 also known as the 2008 Farm Bill

SFA Child Nutrition Director:	Dementrious P. Giovas, SNS	
E-mail address	dgiovas@gisd.k12.nm.us	
Phone: (575) 882-6771	Fax: (575) 882-6779	

Grant Contact Person/Project Director:	Demetrious P. Giovas, SNS
E-mail address	dgiovas@gisd.k12.nm.us
Phone: (575) 882-6771	Fax: (575) 882-6779

Grant Applicants must be received to Student Nutrition Bureau on or before May 15, 2009 to:

Leonard Mirabal, State Director
Student Nutrition Bureau
120. S. Federal Place, Room 105
Santa Fe, NM 87501

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FRESH FRUIT AND VEGETABLE PROGRAM 2009-2010 SCHOOL YEAR GRANT APPLICATION

A. NAME OF SCHOOL FOOD AUTHORITY (SFA):	
Contact Person and Title	Reyes Valtierra, Principal for Berino Elementary
SFA Address:	92 Shrode Rd.
E-mail Address:	RVALTIERRA@GISD.K12.NM.US

B. SCHOOL INFORMATION:		
School Name:	Berino Elementary	
Address:	92 Shrode Rd.	
Grade Level:	K – 6	

C. SCHOOL DATA	
Enrollment from October 2008 – 40 th day:	650
Enrollment from February 2009 – 120 th day:	659
Meals Offered (check all that apply):	x SBP x NSLP x After School Snack
Would you describe your school location as (Check	□ Urban × Rural □ Suburban
One):	04 92 0 0 0
Percent (approximately) of student enrollment who	White:05% African American:
are:	Hispanic" _99.55% American Indian or Alaskan
	Native:
	Other race/Ethnic Group:
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October 2008:	Number of Free lunches claimed:	7051
- 12 CT	Number of Reduced price lunches claimed:	420
Attach School Edit Check & Consolidation Form)	3. Number of Paid Lunches claimed:	460
	4. Total Lunches Claimed:	7931
	5. Average Daily Participation (Lunch):	610
	Number of children approved for Free Meals:	578
- 3	7. Number of children approved for Reduced Meals:	34
	8. Total Enrollment:	650

F. Other Information	
Team Nutrition School: (Please check)	x Yes or □ No
Food Preparation Method:	x on-site = satellite = Other-explain
Before School care available?	□ Yes or x No
After School care available?	□ Yes or x No

	G.	PR	OP	os	AL
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If you prefer, you may attach pages for each question, double-spaced with Arial 10-point font. Please be concise

1. Tell us how your school intends to implement the FFVP program. (For example, are you planning to have food carts or kiosk (stands) in the hallway, offer fruit and vegetables in the classroom or have free vending machines?)

The Gadsden I.S.D. will implement the FFVP Program by offering fruits and vegetables to all students in the classroom daily.

2. What times of the day would the fruits and vegetables be made available in your school?

The Fresh Fruits & Vegetables will be available daily at 1:30 p.m.

- 3. How would you promote and advertise the FFVP program at your school with students, and inform the community?
 - 1) Post in the Web Site
 - 2) Inform principal and staff through e-mail
 - 3) Send notice to parents at home.

4. How will the students in your school benefit from the FFVP program?

Introducing new types of fruits and vegetables to students will enhance their ability to chose healthy eating habits and include fruits and vegetables in their diets.

5. What do you anticipate to be your major barrier to success and how will you overcome it?

Especially in lower grades, students are not familiar with many fruits, vegetables, through demonstrations, story telling, and introduction to the roots of each product students will be able to recognize and enjoy the introduction of fruits & vegetables.

6. What nutrition activities or strategies will be incorporated to educate students?

A variety of activities will be introduced from simple product testing to a variety of instructions and demonstrations.

•	ocated amount is spent throughout the en	tire 09-10 school year? (Please be
specific) A budget for each month will be est entire school year.	ablished and modified monthly to insure th	nat the program will be available the
H. SIGNATURES (All are re	quired in blue ink)	
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Fresh Fruit and Vegetable Prograr	and attest to the information provided. If an in accordance with the plan outlined about the specified deadlines.	ove and to implement the program in
1. School Level:		
		e 13
Principal Signature:	201	Date:
(Please Print Name): Reyes Va	12 33	7 / 10/
Phone Number: (575) 882		Fax Number (575) 882-7249
	RRA@GISD.K12.NM.US	1
2. School Food Service Level:		
Food Service Directors Signature:	Demetros P. Giovas	Date: 4/14/09.
(Please Print Name):	Demetrious P. Giovas, SNS	
Phone Number:	(575) 882-6771	Fax Number: (575) 882-6779
E-mail Address:	DGIOVAS@GISD.K12.NM.US	
3. Superintendent Level:		· · · · · · · · · · · · · · · · · · ·
12.	31	
Superintendent Signature:		Date:
(Please Print Name):	Cynthia Nava	
Phone Number:	(575) 882-6203	Fax Number: (575) 882-6229
E-mail Address:	CNAVA@GISD.K12.NM.US	1
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4. State Agency Level:		
Child Nutrition Directors		Date:
Signature:		
(Please Print Name):	Leonard Mirabal	
Phone Number:	(505) 827-1821 or 1814	Fax Number: (505) 827-1815
E-mail Address:	leonard.mirabal@state.nm.us.	1 ax 14ambot. (000) 021-1010
a / taa. 000.		