

Florida Department of Agriculture and Consumer Services Division of Food, Nutrition and Wellness

OCTOBER DATA COLLECTION FORM

5P-2.002, F.A.C.

School Year: _____

Sponsor Name: ______ Sponsor Number: ______

Average Economically Needy (EN) Percentage: _____

Total Number of Sites: _____

		Provision Type	Student Elig	ibility Status			EN %
Site #	Site Name	Applications Community Eligibility Provision 2	Free	Reduced Price	Total Enrollment	Total Free + Reduced	EN% = 'Total Free + Reduced Price' ÷ Total Enrollment
999	Example	CEP			508		100%