

**Child Care Food Program  
Amendment to Application Form  
(change in meals claimed)**

\_\_\_\_\_  
*Today's date*

I, \_\_\_\_\_, will now be  
*Provider's printed name*

claiming: B AM L PM D EV at \_\_\_\_\_  
*circle new meal(s) claimed time(s) meal(s) will be served*

as of \_\_\_\_\_.  
*Effective date/when new meal(s) is served*

Add the following day(s) of the week to my application: \_\_\_\_\_.  
Change my hours of operation to the following: \_\_\_\_\_.

Thank you.

Sincerely yours,

\_\_\_\_\_  
*Provider=s signature*

\_\_\_\_\_  
*CCFP staff/ Child Care Resource signature*

“This institution is an equal opportunity provider”