

New URL: <https://webapp.hhs.mt.gov/cacfp>

Login



Login to Continue

User Name:

Password:

[New CACFP Applicant Login](#)

This computer system is the property of the State of Montana and is subject to the use policies located at: <http://mom.mt.gov>. This computer system may contain sensitive U.S. and State government information and is limited to authorized personnel only. Authorized personnel may inspect any uses of this system. By using this system, the user consents to such inspection at the discretion of authorized personnel. Unauthorized access is a violation of state law 45-6-311, MCA, and prohibited by Public Law 99-474, Title 18, United States Code, Public Law 99-474 and Chapter XXI, Section 1030. Unauthorized use of this system may result in disciplinary action, civil and criminal penalties. Federal punishment may include fines and imprisonment for not more than 10 years, or both. By using this system you indicate your consent to these terms and conditions of use. Log off immediately if you do not agree to these conditions.

[Forgot your password?](#)
To reset your password please call: (406) 444-9500

For assistance please contact CACFP at 406-444-4347 or toll free 888-307-9333 or email us: dedgar@mt.gov

Please visit our web site: www.dphhs.mt.gov/hcsd/childcare/cacfp

Login page. Please enter the user name and password you currently use for the CACFP online system.

Welcome TEST1 CACFP | Logout | [Claims](#) | [Reports](#) | [Institution Detail](#)



Messages

[Claims](#)

Claim List

Entered	<input type="text" value="6/01/2016"/>	to	<input type="text" value="To"/>	Submitted	From	to	<input type="text" value="To"/>	Status	<input type="text" value=""/>	<input type="button" value="Create Claim"/>
Claim ID	<input type="text" value=""/>	Approved	From	to	<input type="text" value="To"/>	Completed	From	to	<input type="text" value="To"/>	<input type="button" value="Filter"/> reset

The system will open up to the Claims List. To access the on-line application, click on the "Institution Detail" link in the upper right hand corner.

Tax/License

For/Non Profit: Lic. Not Required:

No. Facilities: License Expires:

PV No: Tax Exempt:

Capacity: Tax ID:

Meals/Days Served

Breakfast: Supper:

Snack AM: Snack Eve:

Lunch: Saturday Meals:

Snack PM: Sunday Meals:

Liability

Cert Holder: Exempt:

Policy No.:

Expire Date:

Workers Compensation

Cert Holder: Exempt:

Policy No.:

Expire Date:

This will open the Institution Details page. To create, update, or edit your CACFP application, click on the “Applications” tab on the left side of the page.

Applications Edit/Update Current Application

Fiscal Year	Update #	Status	Created	Submitted	Returned	Approved	Approved By	
2017		In Progress	10/17/2016					
2016		Approved	05/10/2016	05/17/2016		05/17/2016	Debora Hansen	
2015	1	Closed	08/03/2015					
2015		Approved	10/17/2014	10/31/2014		10/31/2014	Noele Bryson	
2013		Closed	06/14/2013	03/18/2014		03/21/2014	Noele Bryson	

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Depending on whether this is your first application update for the fiscal year, or an edit to a previously approved application, the wording in this box may differ. It will either say “Create application for 2017” or “Edit/Update Current Application”. Either way, click on the green box in this location to enter the online application. Do *not* click on the “eyeball” icons on the right side of the page if you wish to make changes....these are access to “view-only” copies of previous application updates.

Click here to read the Application Certification Print Application

Submit Application to CACFP

Expand all Collapse all

▶ Contact Information	Completed By: TEST1 CACFP on 10/17/2016
▶ Responsible Individuals	Completed By: TEST1 CACFP on 10/17/2016
▶ Food Service Personnel	Completed By: TEST1 CACFP on 10/17/2016
▶ Training and Records	Completed By: TEST1 CACFP on 10/17/2016
▶ Business Documentation	Completed By: TEST1 CACFP on 10/17/2016
▶ Viability, Capability and Accountability	Completed By: TEST1 CACFP on 10/17/2016
▶ Business Profile	Completed By: TEST1 CACFP on 10/17/2016
▶ Meals	Completed By: TEST1 CACFP on 10/17/2016
▶ Additional Facilities	Completed By: TEST1 CACFP on 10/17/2016
▶ Annual Budget Income and Expenses	Completed By: TEST1 CACFP on 10/17/2016
▶ Civil Rights	Completed By: TEST1 CACFP on 10/17/2016
▶ Messages	

This is the on-line application. All data is included within these drop-down boxes. Initially, the "Completed By" column will be blank, as these are filled in as the application is completed. Click on the arrow to the left of each header to enter data in that section.

Expand all Collapse all

▶ **Contact Information** Completed By: TEST1 CACFP on 10/17/2016

Is this a Non-Profit Institution or For-Profit Institution Private non-profit institutions must submit proof of IRS 501(c)(3) status.

Click here to read the Proprietary For Profit Certification

Is this an institution with one facility or multiple facilities Business Phone [Redacted] Email [Redacted]
Fax Phone [Redacted]

Physical Address Mailing Address same as physical

Address [Redacted] Address [Redacted]
City [Redacted] City [Redacted]
State [Redacted] State [Redacted]

Send Message **Save Section** **Mark Section Complete**

Clicking on the left arrow will open a drop down box for each section. Complete the data in each section, save the section, and then mark the section complete. Once each section is complete, that will be noted by the circled text at the right of the header. Continue until each section is saved and marked as complete.

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Application Detail - [Redacted]

AWACS ID [Redacted] Status Submitted By On

Fiscal Year Created By On Returned By On

Update # NDL Verified Approved By On

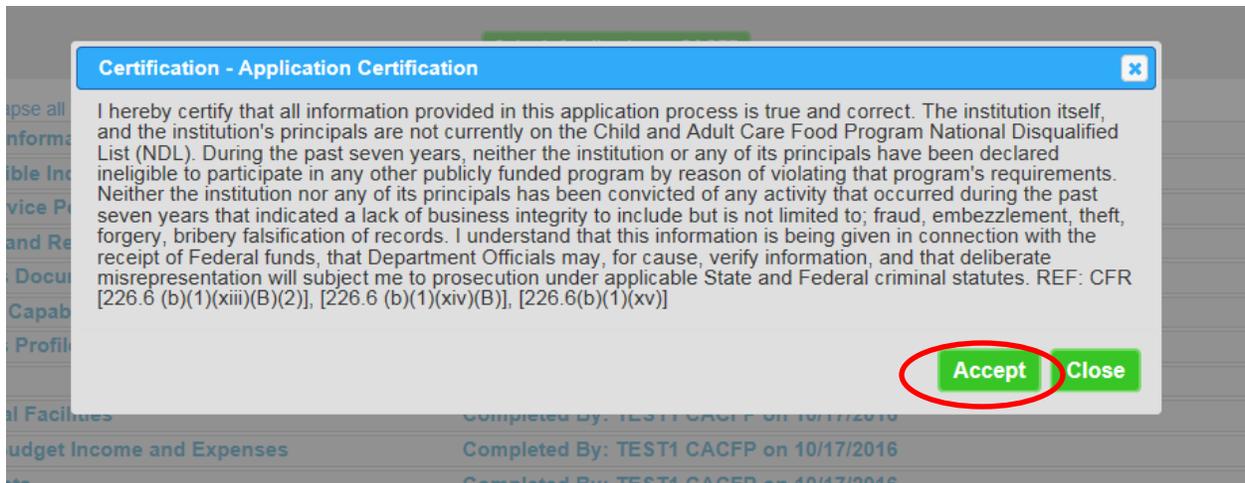
Click here to read the Application Certification Print Application

Submit Application to CACFP

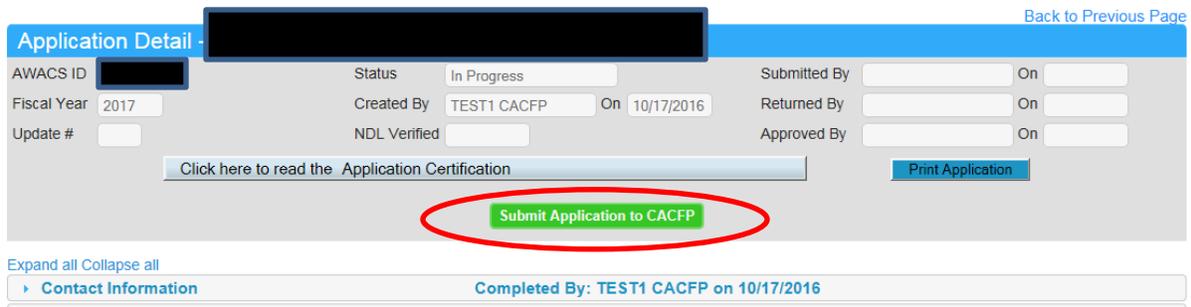
Expand all Collapse all

▶ **Contact Information** Completed By: TEST1 CACFP on 10/17/2016

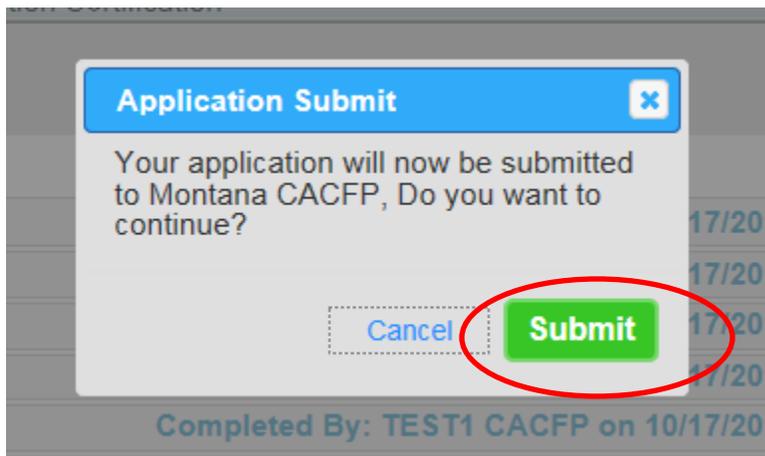
Once all sections are marked complete, click on the Application Certification at the page top .



Choose "Accept".



Once that certification is accepted, you can click on the "Submit Application to CACFP" button.



This submission confirmation will pop-up, click on Submit to send the application to the State agency for approval. If any pages are incomplete or need additional input, an error message will direct you to the appropriate page for completion.