



# USDA (TEFAP) Food Program Agreement

**The Agency understands that in order to receive USDA food from Gleaners, it must adhere to the following:**

- Agency agrees that it will not discriminate against any person in need of food.
- Agency will ensure that, *on an annual basis*, each staff person and volunteer interacting with program applicants and participants completes the Civil Rights Training (online or in person) before they begin to work with clients.
  - Annually, Agency will submit to Gleaners proof of trainings.
  - For infrequent volunteers, Agency will provide an abbreviated training during orientation.
- Agency will require clients to sign the USDA self-declaration form to receive USDA food items.
  - Agency will maintain these forms for a minimum of three years plus the current year, and will provide past sign-in sheets to Gleaners upon request.
- Agency will *not* collect social security numbers *or* require clients to provide income documentation in order to receive USDA/TEFAP food.
- Agency will post in a location visible to all clients, the Civil Rights “And Justice for All” poster.
- Agency will maintain a language support plan to assist clients who speak a different language.
- Agency will maintain an outreach plan to create awareness of their program(s).
- Agency will distribute USDA food items within 90 days of receiving an order from Gleaners.
- When storing USDA food, Agency will have it clearly marked “USDA”, and distinguishable from other food items in storage.
- Agency will practice “First-in, First-out” (FIFO) inventory management.

**If Agency is a faith-based or religious organization, it also agrees to adhere to the following:**

- Agency agrees to post the Written Notice of Beneficiary Rights poster, provided by Gleaners.
- Agency will use the Beneficiary Referral Request form, in case clients request a referral to a different pantry. Agency will make a reasonable effort to refer the client to an alternate service provider.



\_\_\_\_\_  
Agency Name

\_\_\_\_\_  
Agency Reference #

\_\_\_\_\_  
Print Name and Title of Agency Representative

\_\_\_\_\_  
Agency Signature

\_\_\_\_\_  
Date