

**Rhode Island Department of Education
Office of Statewide Efficiencies – Nutrition Program
NAMES OF SFSP PRINCIPALS**

NAMES OF SFSP PRINCIPALS	MAILING ADDRESS	DATE OF BIRTH	END OF TERM DATE, if applicable	SIGNATURE OF SFSP PRINCIPAL
CHAIRPERSON - BOARD OF DIRECTORS, OR SUPERINTENDENT:				
EXECUTIVE DIRECTOR/OWNER, if applicable:				
DIRECTOR or other RESPONSIBLE INDIVIDUAL, if applicable:				
BUSINESS ADMINISTRATOR or ACCOUNTANT, if applicable (specify title)				
FOOD SERVICES DIRECTOR, if applicable:				
OTHER (specify title)				
OTHER (specify title)				

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