

FLORIDA DEPARTMENT OF HEALTH COMPLETING THE BOARD OF DIRECTORS SCREEN

Bureau of Child Care Food Programs Fiscal Year 2023-2024 Florida Department of Health

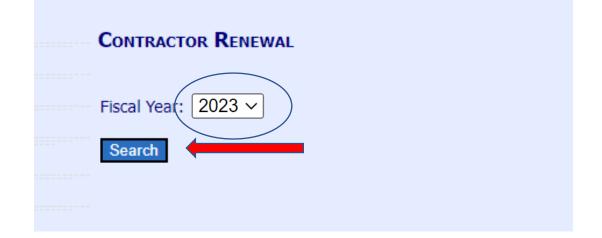


- Access and login to MIPS as you normally would
- Click Contractor Renewal on your MIPS menu to access the renewal screen





 Make sure 2023 is shown in the Fiscal Year drop-down



Click Search



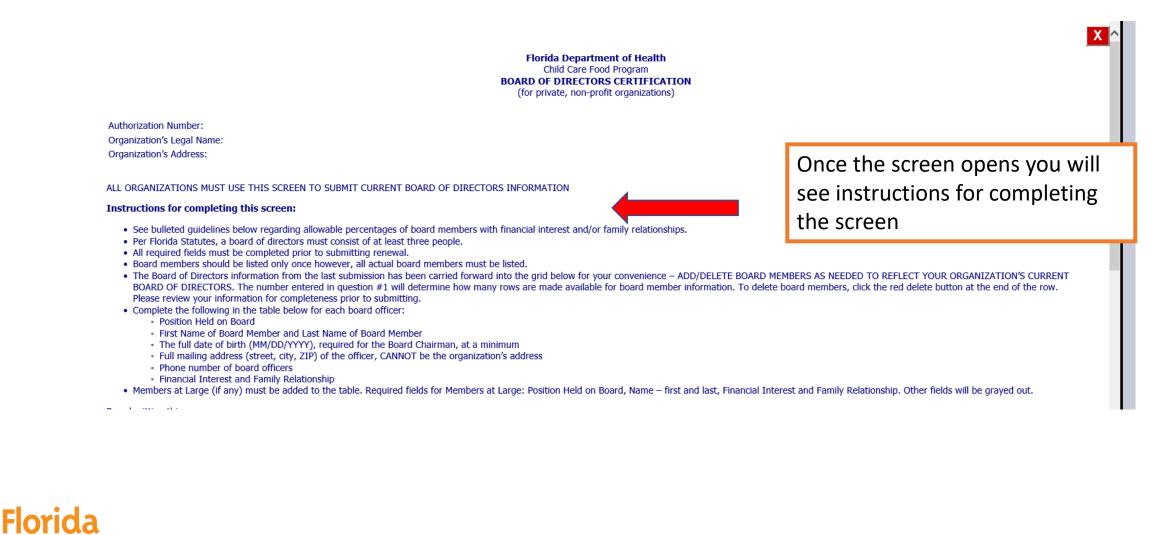
- For Private Non-Profit organizations, Section C will contain question C.3.
- In this section, click the yellow Board of Directors button to open the Board of Directors screen

C. Information Update:

- 1. The contractor's <u>Application</u> and <u>Site Information</u> screens in MIPS are current and correct, or have been updated for DOH approval. (Click on the underlined form name to access the applicable screens, and submit changes if needed)
- 2. 🗌 The last approved versions of the Compensation Plan and Supplemental Budget are up-to-date, or updated versions are uploaded below for DOH approval.
 - FOR C.2, DO NOT SUBMIT NEW FORMS IF CHANGES ARE NOT NEEDED. To view documents from previous years, use the FY dropdown at the top of page. If changes are needed, click on the Blank Forms/Documents link on the MIPS side menu to download a blank form.







- The chart on the Board of Directors screen will contain the information that was submitted with last year's renewal.
- You will need to verify that the chart reflects the organization's <u>current</u> Board of Directors information.
- All non-profit organizations, regardless of the number of board members, must use the chart for submitting Board of Directors information. Follow the instructions at the top of the screen.



- Question 1 on this screen MUST be answered and determines the number of rows that will appear on the screen
- Questions 2 and 3 will auto-calculate based on your answers in the Financial Interest and Family Relationship columns.

 What is the total number of the organization's board members? Percentage of board members who are employees of the organization, investors in the organization, parents of children that do/will participate in the CCFP through the organization, or individuals that receive any type of compensation or benefits from the organization? Percentage of board members who are related by blood or marriage to each other or to employees of the organization? Board Officers (if officers are in two positions, list only once) 							
Position Held on Board	First Name of Board Member	Last Name of Board Member		Full Mailing Address (Do not list the organization's address)	Phone Number	Financial Interest (Y/N)	Family Relationship (Y/N)



Save Return

- Once you have completed the tables, click the blue Save button. Not saving may result in the loss of any work completed.
- You may click the blue Return button at any time to return to the renewal screen
- If no changes need to be made to this screen, you must check the box to certify that the information is still true and correct.
 - If you have made changes to the screen, you will not see this box

Click to view previous years Board of Directors form.

 \Box By checking this box, I certify that the information on this screen is still true and correct.



Once you have saved the Board of Directors screen and returned to the renewal screen, complete the renewal screen as you normally would.



For any questions, contact: Bureau of Child Care Food Programs 850.245.4323

