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| --- | --- | --- | --- |
|  | Week Of: | School Name, District: | Teacher: |
|  | **Last** | **First** | **Gender** | **Homeroom Teacher** | **Health Concerns** | **Dietary Restrictions**  | **Epi Pen****(Y/N)** | **ELL****(Y/N)** | **Aide****(Y/N)** |
| 1. |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |
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| 28. |  |  |  |  |  |  |  |  |  |
| 29. |  |  |  |  |  |  |  |  |  |
|  | **Last** | **First** | **Gender** | **Homeroom Teacher** | **Health Concerns** | **Dietary Restrictions**  | **Epi Pen****(Y/N)** | **ELL****(Y/N)** | **Aide****(Y/N)** |
| 30. |  |  |  |  |  |  |  |  |  |
| 31. |  |  |  |  |  |  |  |  |  |
| 32. |  |  |  |  |  |  |  |  |  |
| 33. |  |  |  |  |  |  |  |  |  |
| 34. |  |  |  |  |  |  |  |  |  |
| 35. |  |  |  |  |  |  |  |  |  |