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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. |  |  |  |  |  |  |  |  |  |