|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOTE: All cafeteria requests shall be filled out and submitted to the appropriate site cafeteria 10 days in advance of the requested** | | | | | | | | | | | | | |  |
|  | **service date.** |  |  |  | |  |  |  | |  |  |  |  |  |
|  | Requests not with in the 10 day requirement may possibly not be met or provided due to supply issues and staffing issues | | | | | | | | | | | |  |  |
|  |  |  |  |  |  | |  |  | |  |  |  |  |  |
| A. School Site | | BSA | SLS | GOES | Requesting Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |  |
|  |  | CVHS | MLHS |  |  | |  |  | |  |  |  |  |  |
|  |  |  |  |  | Requesting Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |  |
|  |  |  |  |  |  | |  |  | |  |  |  |  |  |
|  | SCHEDULE | |  |  |  | |  | Personnel to Transport | | | |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  |  |  |  |
| Date of Trip | |  |  |  |  | | Grade level | |  | |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  |  |  |  |
| Departure Time | |  |  |  |  | | Number of Students | |  | |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  |  |  |  |
| Return Time | |  |  |  |  | |  |  |  | |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  |  |  |  |
|  |  |  | Please Prepare | |  | | Meals | Lunch/Breakfast |  | |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | |  | Cafeteria phone #'s: | |  |
|  |  |  |  |  |  | |  |  |  | |  | BSA 225-0410 | |  |
| Any children with special dietary needs? Y/N | | | | Student/s: |  | |  |  |  | |  | SLS 962-5600 | |  |
|  |  |  |  |  |  | |  |  |  | |  | GOES 275-7004 | |  |
| Will the class be eating back at school, in cafeteria after normal lunch service? Y/N | | | | | | | | Time: |  | |  | CVHS 275-7059 | | |
|  |  |  |  |  | |  |  |  |  | |  | MLHS 245-7922 | |  |
| ***Please provide lead cook with class roster of children that ate the meal on this specific trip.*** | | | | | | | | |  | |  |  |  |  |
| (students' name must be checked off as you hand him the meal) | | | | | |  |  |  |  | |  |  |  |  |
|  |  |  |  |  | |  |  | **Approvals:** |  | |  |  |  |  |
| Lead cook signature | | |  |  | |  |  | Principal |  | |  |  |  |  |
|  |  |  |  |  | |  |  |  |  | |  |  |  |  |
|  |  |  |  |  | |  |  | Office Manager |  | |  |  |  |  |