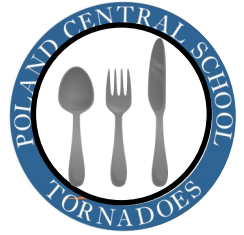


FOOD SERVICE DEPARTMENT

POLAND CENTRAL SCHOOL

REQUEST FOR SERVICES OR FOOD



Requests shall be made one week in advance for a grade level or department
and three weeks in advance for district wide events such as graduation.

Person Making Request _____ Date of Request ____ / ____ / ____

Event/Function Title _____ Annual Event? YES NO

Date of Event ____ / ____ / ____ Event Start Time _____ AM PM Delivery Time _____ AM PM

Number of Participants _____ Location of Event _____

Person Responsible for the Building Use Form for Event _____

Item Name	Number Requested
Chips or Snacks (1 snack bag/person)	
Cookie Tray	
Coffee / Tea Service	
Fruit (in season choices as served in cafeteria)	
Water (.5 liter bottle)	
Other:	
Other:	

Once choices are made, submit form to the Food Service Department for initial review.

Superintendent Approval YES NO _____ Date ____ / ____ / ____

Department, Fund, or Agency to be Billed _____

Person Completing Order for Food Service _____ Date _____