



Orono Schools Health Services
Lactose Intolerance
Dietary Request Form

Dear Parent or Guardian,

You have informed Health Services that your child has lactose intolerance and is unable to drink milk with his/her lunch.

School food service regulations require that we have written verification from a parent stating your child is unable to drink regular cows milk. Lactose free milk will be available upon request.

If your student has a milk allergy, a doctor's note will be required.

Please return this completed form and send it to the school your child attends.

Schumann Elementary Health Office	Phone: (952) 449-8487	Fax: (952) 449-8499
Orono Intermediate School Health Office	Phone: (952) 449-8473	Fax: (952) 449-8479
Orono Middle School Health Office	Phone: (952) 449-8461	Fax: (952) 449-8453
Orono High School Health Office	Phone: (952) 449-8417	Fax: (952) 449-8449

Student's Full Name: _____ Date of Birth: _____

Parent Signature: _____ Date: _____