

PACKAGED MEAL REQUEST FORM

Event Date: _____ Departure/Request Time: _____

Type of event: ☐ Field Trip ☐ Testing ☐ Other _____

Number of students participating: _____

Check and complete, if applicable:

Meal(s) Request: ☐ Breakfast ☐ Lunch

Number of Meals: Breakfast _____ Lunch _____

Contact person: _____

Section(s)/Room #/Grade: _____

Teacher's Signature

Date Submitted

Cafeteria Supervisor's Signature

Date Received

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(1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
(2) fax: (202) 690-7442; or
(3) email: program.intake@usda.gov.
This institution is an equal opportunity provider.

Packaged meal request for events should be submitted a minimum of **10 school days** prior to service day.