



Manor ISD
Food Service Department
Sack Lunch Request Form
TWO WEEK NOTICE REQUIRED

Date of Request/Notice: _____

Campus: _____

Specific Grade Level/Organization: _____

Contact Person: _____

Date of Field Trip: _____

Time Lunches will be Picked Up: _____

Approximate # of Students Needing Sack Lunches: _____

Teacher Signature: _____

Date: _____

- A list of students with id numbers requesting a sack lunch must be attached to this form.
- The teacher or designated adult will check student's name when they accept their sack lunch. Field trip rosters **must be** returned to the cafeteria manager with the left-over sack lunches by the end of the day to ensure all those meals are properly documented in our point of sale system.
- Sack lunches must be served no later than 4 hours after the listed pick up time in accordance with HACCP food safety procedures.

Food & Nutrition Department Use Only:

Food Service Manager

Date

This institution is an equal opportunity provider

Field Trip Meal Count

Contact Name: _____

Field Trip Date: _____

TOTAL NUMBER OF MEALS NEEDED _____

Student Name	Student ID #	Balance Due
1		
2		
3		
4		
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