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• Office: 507-333-6000 | Fax: 507-333-6050

2025-26 Parent Checklist

Campus Parent Portal or by su Complete the enclosed Waive Read the enclosed Meal Polic Read the enclosed Benefits o Mail this packet to Sodexo Foo	be completed online using the Infinite ubmitting the enclosed application form. er of Confidentiality form. by. f Breakfast. od Service Office at 925 Parshall Street, mber 15, 2025 or bring the completed
choose <u>not</u> to complete the enclose form to Food Service Office at 925 P	
form and wish to be recorded as	lete the Application for Educational Benefits declining the benefits.
Parent/Guardian (please print clearly)	
Home address	
Parent/Guardian Signature	Scan to create a Parent Portal
Date	