



Students with Lactose Intolerance

Dear Parent/Guardian,

State law (Minnesota Statutes 124D.114) requires a Sponsoring Authority of school meal programs to provide one of these alternatives for a student with lactose intolerance if the parent/guardian has requested an alternative in writing:

- Lactose-reduced milk, or
- Milk fortified with lactase in liquid, tablet, granular, or other form, or
- Milk to which lactobacillus acidophilus has been added.

Please complete the form below if you need to make this request for your child. Please Note- if you have an existing Lactose Fee Request Form on file, you do not need to complete a new form each year. Please contact me at 763-272-3047 if you have any questions.

Respectfully,
Laura Wacker RDN, LD
Director of Nutrition Services

Monticello Public Schools | 302 Washington St, Monticello, MN 55362
Direct: 763-272-3047 | Fax: 763-272-2009

Parent/ Guardian Request for Lactose Reduced Milk

Student Name: _____ School: _____ Grade: _____

Parent/Guardian Name: _____ Telephone Number: _____

Parent/Guardian Signature

Date

Submit Form to Laura Wacker at 302 Washington St, Monticello, MN 55362