

Lake Travis ISD Food and Nutrition Services

Medical Meal Accommodations

This form is not required to be updated annually unless there is an update to your student's medical condition.

Part A: to be completed by parent/guardian	
Student Name: _____	DOB: _____ Student ID: _____ Campus: _____ Grade: _____
Printed Parent/Guardian Name: _____	Phone Number: _____ Email Address: _____

Part B: MUST be completed by a State licensed healthcare professional or registered dietitian (e.g. MD, DO, NP, APRN, or RD) All sections must be filled out for meal modifications to be implemented.		
1. Does the child have a disability recognized by the Americans with Disabilities Act? ☐ Yes ☐ No		
2. If the child does NOT have a disability, does the child have a food allergy or intolerance that results in an anaphylactic or adverse reaction when exposed to that specific food? ☐ Yes ☐ No		
3. Please identify the disability, food allergy, or intolerance & describe the major life activities affected.		
4. Check all foods that affect the child (if applicable): ☐ Fresh Dairy (fluid milk, yogurt, cheese, cheese powder, etc.) ☐ Baked Dairy (baked/cooked into another food item) ☐ Fresh Eggs (scrambled eggs, mayonnaise, dressings, etc.) ☐ Baked Eggs (baked/cooked into another food item) ☐ Peanuts ☐ Tree Nuts ☐ Wheat/Gluten ☐ Soy ☐ Fish ☐ Shellfish ☐ Sesame ☐ Other: _____		
5. Please describe meal accommodation to be made: (foods to be omitted, modified, or substituted)		
_____ Physician's Printed Name or Stamp	_____ Physician's Signature	_____ Date
By submitting this form, you consent to LTISD FANS contacting your child's medical provider about the listed condition. To opt out, initial here: _____.		
I have read the above orders and agree with this plan of care for my child.		
_____ Parent Signature		_____ Date

Submit completed forms to your campus nurse or email them to Food and Nutrition Services. Please allow up to 7 business days for processing. Parents may remove restrictions with written consent by emailing the FANS Dietitian at bellm@ltisdschools.org. To add or update accommodations, a new form must be submitted. For more information, visit: www.ltisdschools.org/mealaccommodations.

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