



RIALTO UNIFIED SCHOOL DISTRICT CHILD NUTRITION SERVICES

PLAN AHEAD!
PLEASE SUBMIT ALL REQUESTS AT LEAST 3 WEEKS IN ADVANCE

FIELD TRIP REQUEST

IMPORTANT: Requests submitted by teachers or non-administrators **will not** be accepted

SUBMIT TO: Rialto Nutrition | Email: RialtoNutrition@rialtousd.org

CONFIRMATION: You will receive a confirmation email once the event is scheduled

REMEMBER: SEND THE EXACT STUDENT LUNCH COUNT 3 DAYS BEFORE THE FIELD TRIP.

INFORMATION

TODAY'S DATE: _____

SCHOOL NAME: _____

FIELD TRIP DATE: _____

CONTACT PERSON: _____

PHONE/ EXT: _____

EMAIL ADDRESS: _____

MEAL REQUEST

TEACHER NAME: _____

ROOM NUMBER: _____

STUDENT LUNCHES NEEDED: _____
MILK NEEDED: WHITE _____ CHOCOLATE _____

****FINAL COUNT: (3 DAYS PRIOR TO FIELD TRIP) _____**

- ALL MEALS MUST BE COUNTED/VERIFIED PRIOR TO LEAVING FOR FIELD TRIP**

STUDENTS WITH ALLERGIES

STUDENT NAME/ID: _____

ALLERGY: _____

STUDENT NAME/ID: _____

ALLERGY: _____

STUDENT NAME/ID: _____

ALLERGY: _____

FOR CHILD NUTRITION DEPARTMENT USE ONLY

DATE RECEIVED: _____

RECEIVED BY: _____

EVENT SCHEDULED: ☐ Yes ☐ No

CONFIRMATION EMAIL SENT: _____

****PLEASE RESUBMIT THE FORM WITH THE UPDATED COUNT 3 DAYS PRIOR TO THE FIELD TRIP**