

RIALTO UNIFIED SCHOOL DISTRICT
CHILD NUTRITION SERVICES

FIELD TRIP REQUEST

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

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: _____ STUDENT BREAKFAST 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