



# North East Independent School District School Meal Modification Request for School Year 2016-2017

The school meal modification request must be submitted to the North East Independent School District **yearly** by the parent or guardian. **This form must be completed and signed by a Licensed Medical Authority (Physician, Physician Assistant or Advance Practice Nurse).** Turn form in to School Nurse.

Student Legal Name - Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Student ID # \_\_\_\_\_ School: \_\_\_\_\_ Grade (Sept. 2016): \_\_\_\_\_

1) Does this student have a disability? Yes \_\_\_\_\_ No \_\_\_\_\_

Under Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990, and the ADA Amendments Act of 2008, a "person with a disability" is any person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment or is regarded as having such an impairment.

**If yes,** check the major life activities affected by the disability and reason the disability prevents the child from eating the regular school meal.

breathing \_\_\_\_; eating \_\_\_\_; hearing \_\_\_\_; learning \_\_\_\_; seeing \_\_\_\_; speaking \_\_\_\_; walking \_\_\_\_;  
performing manual tasks \_\_\_\_; caring for one's self \_\_\_\_

2) Condition/Diagnosis that requires a special diet or food modification at school: \_\_\_\_\_

- This form is not needed for lactose intolerance as the District offers lactose free milk and soy milk as a milk option.
  - The School Nutrition Services staff will make every attempt to reasonably accommodate students that have dietary restrictions that are not life threatening or not reported by a physician as a disability.
  - School Nutrition Services will not make menu accommodations based on religious or food preferences.
- 3) Check the food allergen(s) to be omitted from the child's diet or the no substitution needed box. Review the foods that are recommended substitutions. The most common food allergies are peanut, tree nut, milk, egg, seafood, shellfish, soy and wheat. Space is provided at the end of the form for additional foods to omit. A more complete list of allergens in school products is available at [www.neisd.net/foodserv/HTML/SpecialDietsAllergens.html](http://www.neisd.net/foodserv/HTML/SpecialDietsAllergens.html)

No Substitution Needed

Peanut/Tree Nut Allergy

Common School Items: A few prepackaged snack items processed in a facility that contains tree nuts

Diet Restriction

No nut products

Substitution Could Include

Nut Free snack

Milk Allergy (not lactose intolerant)

Common School Items: Milk, yogurt, ranch dressing cheese products, some breaded entrees, entrée salads, ice cream, pudding, some bread products

Diet Restriction

No milk products  
Restricts all dairy products

Substitution Could Include

Alternate food items available most days.

Egg Product Allergy - restricts eggs in baked items, mayonnaise based and breaded meat items

Common School Items: Breaded meat items, mayonnaise products, French toast, cinnamon rolls

Diet Restriction

No egg products

Substitution Could Include

Alternate menu entrée choice of the day



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<input type="checkbox"/> Egg Allergy - allows eggs in baked items, mayonnaise based and breaded meat items	Diet Restriction	Substitution Could Include
Common School Items: Eggs (breakfast taco)	No eggs	Alternate menu entrée choice of the day Cereal or Breakfast Bar/Pastry
<input type="checkbox"/> Fish (seafood, shellfish)	Diet Restriction	Substitution Could Include
Common School Items: Fish	No fish	Alternate entrée choice of the day
<input type="checkbox"/> Soy Allergy – most of our food	Diet Restriction	Substitution Could Include
Common School Items: <u>Soy oil</u> : Most bread items fried rice, most entrees, salad dressings, ranch dip, packaged snacks, gravy <u>Soy protein</u> : Most entrees, egg rolls, soy milk, soy sauce	No soy	Parent should contact the School Nutrition Services Office for assistance in selecting menu items the child may consume. Or parent may review posted menu and circle items based on allergen list and submit menu to the cafeteria manager or School Nutrition Services Office.
<input type="checkbox"/> Wheat Allergy (Wheat, Rye, Barley Oats)	Diet Restriction	Substitution Could Include
Sandwich bread/buns, rolls, flour tortillas, crackers, croutons breaded meat items, pizza, pizza sticks, corn dogs, pasta, pretzels, spicy hash browns, potato wedges, gravy, soy sauce, breakfast cereal, some breakfast entrees, cookies, cereal bars, some ice cream products	No wheat/oat products	Parent should contact the School Nutrition Services Office for assistance in selecting menu items the child may consume. Or parent may review posted menu and circle items based on allergen list and submit menu to the cafeteria manager or School Nutrition Services Office.
<input type="checkbox"/> Foods to omit that are not already listed		Suggested Foods to Substitute (Some substitutions recommended may not be available)

Medical Authority Name (print): \_\_\_\_\_

Medical Authority Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

*I understand that if my child's medical or health needs change, it is my responsibility to notify the school and fill out a new Special Diet Request. Parent/guardian must submit a request in writing or email to remove diet restriction.*

Student Legal Name - Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Parent/Guardian Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

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