

## REQUEST FOR SACK LUNCH

**SCHOOL NAME:** \_\_\_\_\_

**DATE OF ACTIVITY:** \_\_\_\_\_

**TEACHER'S NAME:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

**NUMBER OF MEALS REQUESTED:** \_\_\_\_\_

**TIME MEALS WILL BE PICKED UP:** \_\_\_\_\_

**COMMENTS:**

This form should be submitted to the lunchroom manager two (2) weeks before the date of the activity. Groceries are ordered two (2) weeks before the serving date and the schools may not have the items needed for the meals if you do not follow this procedure.

The temperature of the meal is to be taken before service and the temperature and the time recorded on the student roster.

**A student roster must be checked as the meals are distributed. The roster and any leftover meals must be returned to the school lunchroom the morning following the activity.**