Our Lady of Perpetual Help

FOOD IN SCHOOL APPROVAL FORM

(including Field Trips)

This form is to be submitted to the School Nurse's Office at least **one week** prior to the scheduled event.

Teacher/Sponsor of Activity: _____

Grade(s): _____

Date: _____ Time: _____ Location: _____

Purpose of the Event: _____

Please list all foods/beverages being served and attach labels:

_____

_____

_____

Food will be delivered to (circle one): Main Office by Parents

School by Restaurant

Provided by teacher

Other _____

Food Approved (circle one): Yes OR No

Teacher/Sponsor Signature: _____

Approved/Denied by: _____

If approved, parents of all students in the particular grade, club etc. must be notified of the event by the teacher or sponsor in charge and special accommodations must be made if necessary.

***** No food is to be prepared at home.**