Brenham ISD Child Nutrition Services

Food Allergy/Disability Substitution Request

2017-2018

Student Name: _____ Age: _____

School: _____ Grade/Classroom: _____

Parent/Guardian: _____ Telephone: _____

As a parent or guardian, I give permission for Brenham ISD to contact the physician's office regarding my child's dietary needs. _____*(Parent Signature)*

The U.S. Department of Agriculture School Meals Program requires that all questions be answered in order for any diet modifications or substitutions to be made in school meals. This form must be signed by a licensed physician.

Physician's Statement

DIAGNOSES: _____

LIFE THREATENING FOOD ALLERGY – Omit these foods:

_____ Fluid Milk (by itself) _____ Milk (as an ingredient) _____ Peanuts _____ Tree Nuts _____ Eggs

_____ Fish _____ Wheat _____ Soy _____Other: _____

STUDENTS WITH DISABILITIES: (Please explain disability and the diet modification below).

_____

_____

1. Can the student consume foods where the allergen is an ingredient in the food product? ____yes ____no
   (Example: Scrambled eggs are omitted but egg as an ingredient in pancakes is allowed.)
   Explain: _____
   _____
2. Explanation of why this disability restricts the diet:
3. Major Life activity affected by the life threatening food allergy or disability: (Check all that apply)
   (Note: Brenham ISD cannot honor this document unless at least one life activity is marked.)
   _____Eating _____caring for one's self _____performing manual tasks _____walking _____seeing
   _____hearing _____speaking _____breathing _____learning
4. Foods to omit Replace With Allowable foods

   _____ _____
   _____ _____
   _____ _____

5. Consistency Recommendations: _____ NPO;

Solids: _____No Solids _____Puree _____Mechanical Soft _____Chopped _____Regular

Liquids: _____ No Liquids _____Thin _____Thickened _____Nectar _____Honey _____Pudding

Physicians Signature _____ Date _____

Telephone _____ Clinical/Facility Name _____

RETURN TO CHILD NUTRITION

Questions? Contact the Child Nutrition Office: 979-277-3750 Fax 979-277-3751