

Request for Soy Milk Substitute (Students with Non-Disabling Special Dietary Needs)

Non-disabled student seeking a substitution for milk: The school food authority may choose to make a milk substitution available for students with a non-disabling special dietary need, such as milk intolerance or for cultural or religious beliefs. If the school food authority makes these substitutions available, the milk substitute must meet nutrient standards identified in USDA regulations.

Part 1: To be completed by Parent/Guardian

Child's Name	Date of Birth	M F
Name of School	Grade Level/Classroom	
Parent's/Guardian's Name	Address, City, State, Zip Code	
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Phone	Email	

Part 2: Request for milk substitution for non-disabled students

To be completed by Medical Authority or Parent/Guardian

SCASD provides approved, nutritionally equivalent **soy based milk** as a milk substitute to students with non-disabling or other special dietary needs when Part 2 is completed by a Parent/Guardian and approved by the school/school district. Federal regulations do not permit the use of bottled water or juice as a milk substitute unless the student has additional allergies that exclude soy as documented by a medical authority.

Does the child have a non-disabling medical or special dietary need that restricts intake of fluid milk? Yes No

Medical or other special dietary need:

Lactose Intolerance Non-Life-Threatening Milk Allergy Religious, Ethnic, Cultural Belief

Parent/Guardian Signature: _____ **Date:** _____

School Nutrition Director Signature

Date

FOR OFFICE USE ONLY/ANNUAL RECORD UPDATE:

The information on this form should be updated annually to reflect the current needs of the student. Changes require submission of a new form signed by the Physician/Medical Authority.

Parent confirmed no change in diet order. ___ Date _____ ___ Date _____ ___ Date _____

___ Date _____ ___ Date _____ ___ Date _____ ___ Date _____ ___ Date _____

A copy of this form should be kept by the School Food Service and the Nurse. FERPA allows school nurses to share student's medical information regarding dietary needs with school food service. **Return completed form to: SCASD Food Service Dept., 650 Westerly Parkway, State College, PA 16801.**