

# **Food Preference Request**

(Hot Sheet)

CF/H-14e New 1/16

(Optional)

This form will be used for child's non-medical food substitutions request in the classroom/socialization/FCCH (i.e. religion).

1. Complete child and parent name, phone number, reason for substitution, center/FCCH, effective dates, omitted food items, substitutions.
2. Have parent/guardian sign and date, and intake staff sign and date.
3. Place a copy in child's file, and on allergies and restriction list in classroom.
4. Give request to Delegate/Grantee Food Services Coordinator to evaluate for reasonable accommodations.