

**Milk Choice – W = 1% White, S = White, skim, C = Chocolate, skim				
Received Lunch- Check off √	Student ID#	Student Name	*Milk Choice	Food Allergies Note:
Ex: √	Ex: 123456	John Doe	C	On file - peanuts
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Field Trip Request for Sack Lunches
[to be completed by the classroom teacher]

Date Ordered:		
Name:	Classroom Number	Telephone ()
Number of Student Lunches	Number of Adult	Lunches
Date Needed:	Time Needed:	
Budget Code (if needed)	·	
risk of food- borne illnesses. The tea at or below 41°F. A thermometer and each field trip.  The digital thermometer must travel teacher to confirm safe temperature. Teacher must use alcohol wipes to some subject of the confirmal teacher.  Insulated Cooler Checkout: Coolers are available on a limited basis;	acher and/or field trip chaped a Food Safety and Temporal with the food. The digital is before departing the can sanitize thermometer when the same are damaged or salled: \$100 cooler, \$25 the that blue ice packs are us rough the line before the food a food of the same and the same are users.	not returned, the school or program will be billed. ermometer, \$10 blue ice packs. Unless consumed sed in insulated coolers. field trip:
TOTAL COOLERS CHECKED OUT	Γ:′	COOLER NUMBERS:
THERMOMETER CHECKED OUT:		
Teacher Signature:		Date:
Team Lead Signature:		Date:
TOTAL COOLERS CHECKED IN: _		COOLER NUMBERS:
THERMOMETER CHECKED OUT:		
Teacher Signature:		Date:
Team Lead Signature:		Date: