



Maple River Schools - ISD 2135

Food Service Office
P.O. Box 515
101 6th Avenue NE
Mapleton, MN 56065
(507) 524 - 3918 Ext. 282
Heather Ehlke, Foodservice Director

SPECIAL MEALS

If special meals are needed and requested, certification from a medical doctor must

- (1) Verify that special meals are needed and why.
- (2) Prescribe foods to be eliminated and what should be substituted.

Name of student for whom special meals are requested:

Student Name _____ Grade _____

School Site _____

Reason for special Diet _____

List Food to be Eliminated:

List Substitutes:

I certify that the above named student is in need of special meals prepared as described above.

Physician's Signature

Date

Parent's Signature

Date