

Request Fortified Soymilk for A Child Who Does Not Drink Milk

Form for Parent of Legal Guardian to Complete

USDA has permitted schools to offer fortified soymilk, or non-dairy fluid milk substitutes, to children participating in the National School Lunch and Breakfast Programs. If your child needs a non-dairy fluid milk substitute, please complete this form.

Name of Parent/Legal Guardian: _____

Name of Student: _____

Name of School: _____

Relationship to student (check one) Parent Legal Guardian

Food(s) to be omitted from student's meal(s): **Milk**

Alternative beverage requested: **Fortified Soymilk**

Please indicate the reason(s) for requesting an alternative beverage (check all that apply):

Lactose intolerance

Milk allergy

Religious food preferences

Ethnic food preference

Vegetarian

Other: Please indicate _____

Signature of parent/legal guardian _____ Date _____