

Saranac Central School District

PO Box 8, Saranac, New York 12981~Tel: (518) 565-5600~Fax: (518) 565-5617

July 1, 2023

Dear Parent/Guardian:

The Saranac Central School Nutrition Program regulations require that meals offered in the schools meet the meal patterns identified in the program regulations. Food substitutions may be made for medical or special dietary needs on a case-by-case basis if supported by a statement signed by a recognized medical authority. A recognized medical authority may include physicians, physician assistants, or nurse practitioners.

The attached *Authorization for Meal Modification* form contains the required information needed to accommodate your child. Please have your medical authority complete and return to:

Isaac Dirolf
School Food Services Director 1
70 Picketts Corners Road
Saranac NY, 12981

Be sure you sign on the parent/guardian signature line.

Your child's health is very important to us. The School Nutrition Program utilizes The Offer vs. Serve meal service at our elementary schools, middle and high schools (Pre-K not included). This means your child may be able to make choices for his meal and choose something else he is not allergic to. We will make every attempt to accommodate your child's dietary needs; however, if your child requires a special dietary item we do not have on grocery bid, you may need to supply a particular item(s). Please know our School Nutrition Program may not be able to handle the vegetarian and/or religious (i.e. no pork) dietary requests. Parents and students are able to view the menus using family.titank12.com, the school website, and our elementary children also receive a copy to review monthly and make accommodations for meals from home.

The attached form will stay on file until we receive written notification from the parent to remove. I look forward to working with you and your child. Feel free to call if you have any questions at 518-565-5705.

Sincerely,

Isaac Dirolf

Isaac Dirolf
School Food Services Director 1

Saranac Central School District

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2023-2024

AUTHORIZATION FOR MEAL MODIFICATIONS

Student Name _____

School _____

Address _____

Date of Birth _____

City _____

State _____ Zip _____

MEDICAL REASON FOR MODIFICATION _____

Foods to be omitted by the School Nutrition Program due to intolerances/allergies: _____

Recommended alternate foods: _____

Parent/Guardian Signature

Medical Authority Signature

Date

Telephone #

Title

Address

City

State

Zip

Telephone #

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint](#) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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