

**Cocke County Schools Food Service: Request for Meal Modifications**

\_\_\_\_\_  
Student / Participant Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City & Zip Code

\_\_\_\_\_  
School

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Meal Modification Medical Statement**

*Federal law and USDA regulation require nutrition programs to make reasonable meal modifications to accommodate children with disabilities. Under the law, a disability is an impairment which substantially limits a major life activity or bodily function, which can include allergies and digestive conditions, but does not include personal diet preferences.*

1. Describe the impairment and how it restricts the child's diet (i.e., how the ingestion/contact with the food impacts the child):
  
  
  
  
  
2. Explain what must be done to accommodate the child's diet (i.e., specific food(s) to be omitted/avoided from the child's diet):
  
  
  
  
  
3. List the food(s) and/or beverages to be omitted or modified and recommended alternatives:

\_\_\_\_\_  
Signature of State-Recognized Medical Authority\*

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Clinic Name

\_\_\_\_\_  
Phone Number

\*State-Recognized Medical Authority is a licensed health care professional authorized to write medical prescriptions in Tennessee: Medical Doctor (MD), Doctor of Osteopathy (DO), Physical Assistant (PA) with prescriptive authority, Advanced Registered Nurse Practitioner (ARNP), Podiatrist (DPM), and Optometrist (OD).

\*School Nutrition Program\* 305 Hedrick Drive, Newport, Tennessee 37821\* Food Service Office\*423-623-7821 ext. 2040

**This institution is an equal opportunity provider.**