

Request To Begin Or Change Saturday Meal Service

Instructions

- 1. Complete one form for each program or requested change.
- 2. Program administrator will provide completed form to Food Services Manager.
- 3. Food Services Manager will review and send completed form to Area Food Services Supervisor for approval.

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CAFETERIA (PARENT) SITE INFORI	MATION (Must be completed	for all requ	iests)			
Main Site Location Code:	Main Site Location Name:			Region:	Date:	
Main Site Location Address:			AFSS	·SS:		
 SATURDAY MEAL PROGRAM INFO All Saturday School Programs lunch. Breakfast may be served 30 m There must be a 2-hour break Lunch must be served at least 	lasting more than 2 hours are ninutes prior to the start of the between breakfast and lunch	to follow t e Saturday i.	he (2) Progra	meal mandate and s		
Change Type (Select one): O Add Saturday Service O Change/Extension (Date/Days/Times) O Close Program				Program Start Date://		
Program Name:						
Program Location on Campus:						
Breakfast Serving Time:		Lunch Serving Time:				
Start:End:		Start:End:				
Amount Needed:		Amount Needed:				
Program Contact Name:		Phone #:				
Email:						
Additional Remarks:						
FOR NEW PROGRAMS: I am subn	nitting this request a minimun	n of 4-6 we	eks be	efore the program be	egins.	
Program Administrator or Designee:				Date:		
Food Services Manager Signature:			Date:			
Area Food Services Supervisor Review & Approved:			Date:			