



BUSINESS SERVICES DEPARTMENT
NUTRITION SERVICES BRANCH
3333 Airport Way, Long Beach CA 90806
Phone (562) 427-7923 FAX (562) 988-0263

Parent/Guardian's Statement to Remove Special Meal Accommodations

Directions: This form is to be filled out by the parent/guardian of a child who is currently receiving a special diet but no longer requires the special diet.

School: _____

Student Name: _____

Date of Birth: _____

Parent/Guardian Statement: *My child no longer requires a special diet. I would like my child to receive meals from the standard menu.*

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

- Parent/guardian should return completed form to the Nutrition Services Supervisor at their child's school cafeteria.
- The Nutrition Services Supervisor will forward the completed form to a Child Nutrition Specialist at the Nutrition Services Branch.
- Once completed form is received, Nutrition Services will remove restrictions from student's account and discontinue special diet meals within 3-5 days.

**For questions on Special Diets, please contact a
Child Nutrition Specialist at (562) 427-7923.**