

Request for Evaluation and Approval of Foods

(For sale, give away, or earned on campus on during the school day)

Name of requestor: _____

Contact number: _____

E-Mail: _____

Please be as descriptive as possible and include a Nutrition Facts statement from the package if available.

1. Name of food item requested for approval:

2. Manufacturer:

3. Item Code Number (if available): _____

4. Size of package: (weight)_____

For office use only

Not approved Reason _____

Approved Date of approval _____

Date added to approval list _____

Date added to web site _____

Signature: _____