

HEALTH SERVICES

FOOD ALLERGIES AND INTOLERANCES

Accommodations can be made for children who are accommodation may range from substitutions to te	• •	als because of a disability. The
Students Name:	DOB:	Grade:
Child's disability:		
How does the disability affect the child's diet and	now is their life activity affe	cted:
Foods to be omitted	Choice of foods that must be substituted	
Physician's Signature (required)		
Additionally, substitutions for students who do no but are medically certified as having a special med food allergies.		•
Foods to be omitted	Choice of foods to be su	bstituted
Physician's Signature (required)		
*St. Johns County School Food and Nutrition Services and Student H authorized to write medical prescriptions under state law as a medi	_	censed health care professional who is