



**Child & Adult Care Food Program**  
**Medical Statement to Request Special Meals and/or Accommodations**

Please fax completed form to the  
 Child Care Provider

Child Care Provider  
 Fax Number: \_\_\_\_\_

The information on this form is **CONFIDENTIAL** and to be used for special dietary needs only

1. Parent, Guardian, Authorized Representative completes this section; complete a separate medical statement for each child.

Participant's Name	Name of Care Provider/Facility	Facility Telephone
Parent, Guardian, or Authorized Representative	Telephone of Parent/Guardian	Date

2. A Licensed Physician or Recognized Medical Authority check ONLY ONE box below. Please refer to regulatory definitions of disability and medical condition on reverse side of this form.

<input type="checkbox"/>	Participant is disabled or has a food related disability and requires a special meal or accommodation. Provider or facility must comply with prescribed special meals and any adaptive equipment.
<input type="checkbox"/>	Participant is requesting a special meal accommodation due to allergies. Substitutions and/or accommodations may be made, but are not required.

3. Disability or medical condition requiring a special meal accommodation:

4. If the participant has a disability, provide a brief description of participant's major life activity affected by the disability:

5. Diet prescription and/or accommodation: (Please describe in detail to ensure proper implementation)

6. Indicate Texture:

Regular       Chopped       Ground       Pureed

7. Please list specific foods to be omitted and suggested substitutions. Attach a sheet w/additional information if necessary.

Food(s)/food types to be omitted	Suggested substitution(s)

8. Adaptive Equipment:

9. A Licensed Physician or Recognized Medical Authority signature is required on this form for a student who must not eat certain foods due to medical issues.

Signature of Physician or Medical Authority	Printed Name & Title	Telephone	Date
---	----------------------	-----------	------