## 2022-2023 Request for Cafeteria Account Flag

(Parents please note that due to the high volume of requests received at the start of the school year, your request may not take immediate effect. Please discuss with your child what they are allowed to purchase until the flag is activated.—Thank you.)



Date:	
Student Name:	Student ID#:
Parent Name:	Phone Number:
Address:	
School Bldg:	
I hereby request that the above student r service account for the 2022/2023 school	eceive the following restrictions placed on their cafeteria food year.
	dicates that the parents prefer that their child be refused all funds or if they have cash to cover the transaction.
	ndicates that the parents prefer that their child be refused any sare at a zero amount and they are not permitted to place their
No lunch service. This choice indica purchases if they have account funds or if	tes that the parents prefer that their child be refused all lunch they have cash to cover the transaction.
	cates that the parents prefer that their child be refused any e at a zero amount and they are not permitted to place their
	dicates that the parents prefer that their child be refused all a la s or if they have cash to cover the transaction.
No a la carte purchases with accou use only their account funds for meal pur	nt funds. This choice indicates that parents prefer that their child chases only, no a la carte.
No a la carte with the exception of milk. This choice indicates that parents prefer that their child use only their account funds for meal purchases only, with the exception of milk.	
only.)	n you would like placed on the account, i.e. One snack Friday
Office Use Only:	
Date Received: Date	Flagged: FSD: