

# LALC Allergy Accommodation Form

Dear Parent,

We will offer to provide substitutes according to the instructions provided to meet CACFP meal patterns. If anything is unclear, we will request clarification while doing our best to accommodate the request. However, you may provide the substitutions if you wish.

If you have severe allergies you may want to consider packing your own meals for safety reasons. With a center of 72 children, it can be easy for mistakes to happen although we train our staff our very best not to make those mistakes. Again, we are more than happy to make reasonable accommodations and will do so if this is the route you want to choose.

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I choose to have my child eat off the LALC menu and have LALC make accommodations where necessary. I will provide LALC with a current and signed and dated allergy action plan and/ or a signed statement from a medical professional (licensed to write prescriptions in Iowa.) I will also provide the center with a completed and signed CACFP dietary modification request form that is located on our web site at [www.littleangelsadvantage.com](http://www.littleangelsadvantage.com) I agree that if there are any concerns along the way, I will schedule an in person meeting with my director ASAP to discuss those concerns to mediate those concerns and draw up an Action Plan with her.

If your child has severe allergies, they may sit at a small table by themselves, but the table will be placed with in range of the other children so that he/she is not isolated.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OR

I choose to provide substitutions for my own child's meals according to the CACFP guidelines. My child will be provided a plate, silverware, and cup. The staff will put all the food on the plate so that your child is eating like their classmates. I will provide LALC with a current signed and dated allergy action plan and/ or statement from a medical professional (licensed to write prescriptions in Iowa. You may also use the CACFP modification request form that is located on our web site at [www.littleangelsadvantage.com](http://www.littleangelsadvantage.com) I will write on this form that I am not requesting food accommodations.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If your child has severe allergies, they may sit at a small table by themselves, but the table will be placed within range of the other children so that he/she is not isolated. This is so that they do not accidentally grab another child's food or drink.

I agree that if there are any concerns along the way, I will schedule an in-person meeting with my director ASAP to discuss those concerns to mediate those concerns and draw up an Action Plan with her.