



Mission Consolidated Independent School District
CHILD NUTRITION PROGRAM
 SEAMLESS SUMMER OPTION – MEAL REQUEST FORM

Phone Number: 956-323-3800

Fax Number: 956-323-8176

The Child Nutrition Program provides meals for children 18 years and younger at no cost during the summer months. If you would like to request meals for students participating in summer camps or other activities, please complete this form and submit to the Child Nutrition Program Office. You can email the request to Maria D. Woodrum, Director rwoodrum@mcisd.org and/or Ruby Saenz, Director's Secretary rsaenz39@mcisd.org.

MEAL SERVICE: (Check all that apply)

Breakfast

Lunch

_____ # of breakfast meals

_____ # of lunch meals

Start Date: _____

End Date: _____

Days of Operation **(Circle days)**: MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

MAIN CONTACT INFORMATION:

Name: _____

Title: _____

Campus/Site Name: _____

Address: _____

Phone Number: _____

Fax Number: _____



Signature

Date

FOR CHILD NUTRITION PROGRAM OFFICE ONLY:

APPROVED

CNP Director's Signature

Date