Swain County Schools County Schools School Nutrition Program

Parental Request form for Special Diet Requests

Student name:
School name:
Grade: Date:
State the request you have for a special diet for child listed above. Please be specific about which foods you want omitted or added. (Note that the Swain County Schools' School Nutrition Program is not required to provide special diets without a medical statement, but will make every effort to accommodate special preferences when requested)
Parent Signature:
Parent Phone Number:
Please return this form to: Swain County Schools' School Nutrition Program contact information: Jennifer Brown, SN Director PO Box 2340, Bryson City, NC 28713 828-488-3129, ext. 5139 ibrown@swainmail.ora