School Site
Competitive Food/Beverage Request Form

Date/Time: _____
School site: _____
Description of event (i.e. fundraiser, student sale, etc.): _____
_____
School Official in Charge: _____
List of food(s) and beverage(s) proposed for sale on your school site during the school day:
_____
_____
Please complete the Nutrition Facts information below for each proposed food or beverage you would like to sell:

Nutrition Facts

Serving Size oz _____ (grms) _____

Servings Per Container _____

Amount Per Serving

Calories _____ Calories from Fat _____

Total Fat (g) _____

Saturated Fat (g) _____

Trans Fat (g) _____

Sodium (mg) _____

Carbohydrates

Sugars (g) _____

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Trans Fat (g) _____

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Carbohydrates

Sugars (g) _____

*Attach actual product labels if available

For use by Nutrition Services:

Circle one: product meets – product does not meet Smart Snack in School Criteria

Request Approved

Request Denied