



**RAYMORE – PECULIAR SCHOOL DISTRICT**  
Child Nutrition Department – Sarah Chellberg –Director  
21005 S School Rd. Peculiar, MO 64078

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August 23, 2021

Dear Parent/Guardian,

Your child's school:

1. Will make meal modifications prescribed by a licensed physician to accommodate a disability.
2. Does not make meal modifications prescribed by a medical authority due to a food allergy/intolerance or other medical condition that does not rise to the level of a disability.
3. Will make substitutions for fluid cow's milk due to a food allergy/intolerance or for other reasons.

The Medical Statement for Student Requiring Meal Modification form is attached. The form requires completion by a medical authority (Physician, Physician's Assistant, Assistant Physician or Nurse Practitioner) and must be completed in full including what accommodations must be done for the student plus foods to omit and substitute.

Meal modifications are only made when prescribed and due to a student's disability. If a student has an allergy or intolerance that can simply be avoided, the form is not necessary.

To ensure the requested meal modifications can be made on the first day of school, return the completed medical statement by August 1, 2021 to Sarah Chellberg, RD at Child Nutrition, 21005 S. School Rd, Peculiar, MO 64078.

If you are submitting a request for special meals at a time other than the beginning of the school year, it will take approximately 10 school days from the time the request is received until it can be implemented.

**IMPORTANT:** For a student who does not have a recognized disability, and a milk substitute is requested, the only fluid cow's milk substitutions allowed by USDA are: 1. Lactose-free fluid cow's milk or 2. A non-dairy beverage with a nutrient profile equivalent to fluid cow's milk as specified in federal regulations. (Ray-Pec Child Nutrition provides Kikkoman Vanilla Soy Milk).

If milk needs to be avoided or omitted without rising to the level of requesting a substitution, 100% fruit juice and water are available at every cafeteria every day.

If you have any questions or need assistance, please call Sarah Chellberg at 816-892-1371.

Sincerely,

Sarah Chellberg, SNS, RD  
Child Nutrition Director  
Raymore-Peculiar Schools

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## MEDICAL STATEMENT FOR STUDENT REQUIRING MEAL MODIFICATION

<b>Name of Student</b>	<b>Date of Birth</b>	
<b>Name of Parent/Guardian</b>	<b>Parent/Guardian Contact Phone</b>	
<b>Local Education Agency</b>	<b>School Attending</b>	
<b>For Completion By Medical Authority:</b> <i>Physician (M.D. or D.O.), Physician's Assistant, Assistant Physician or Nurse Practitioner</i>		
<b>Identify the child's physical or mental impairment and how it restricts the child's diet, including allergies, requiring the student to have a modified diet.</b>		
<b>Explanation of what must be done to accommodate the child.</b>		
<b>Omitted Foods Listed Below</b>	<b>Substitute Foods Listed Below</b>	
<b>Medical Authority Printed Name</b>	<b>Title</b>	
<b>Medical Authority Signature</b>	<b>Telephone Number</b>	<b>Date</b>
<b>Parent/Guardian Permission:</b> <i>To be completed by a parent/guardian</i>		
<i>I give permission for school personnel responsible for implementing my child's prescribed diet order to discuss my child's special dietary accommodations with any appropriate school staff and to follow the prescribed diet order for my child's school meals. I also give permission for my child's medical authority to further clarify the prescribed diet order on this form if requested to do so by school personnel.</i>		
<b>Signature of Parent/Guardian</b>	<b>Date</b>	

**Important!** Local Education Agencies are required to make substitutions to meals for children with a disability that restricts the child's diet on a case-by-case basis and only when supported by a written statement from a State recognized medical authority.

**Modifications to Accommodate a Disability:** A school is required to make meal modifications prescribed by a medical authority to accommodate a student's disability.

**Definition of Disability:**

Under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA), and Departmental Regulations of 7 CFR part 15b define a person with a disability as any person who has a physical or mental impairment which substantially limits one or more major life activity, has a record of such impairment, or is regarded as having such an impairment.

Major life activities are broadly defined and include, but are not limited to caring for one's self, eating, sleeping, performing manual tasks, walking, standing, lifting, bending, seeing, hearing, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Major life activities also include operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs and activities. Inquiries related to Department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Office of the General Counsel, Coordinator – Civil Rights Compliance (Title VI/Title IX/504/ADA/Age Act), 6<sup>th</sup> Floor, 205 Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480; telephone number 573-526-4757 or TTY 800-735-2966; fax number 573-522-4883; email [civilrights@dese.mo.gov](mailto:civilrights@dese.mo.gov).

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To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.