



ACCESSIBILITY:

To request this file in large print, please email aoda@wcdsb.ca or call (519) 578-3660.

Please complete this form for your child and return it to the school as soon as possible.

STUDENT INFORMATION

School: _____ Teacher: _____

Student Name: _____ Grade: _____

To provide an adequate level of supervision, it is imperative for us to have an up-to-date record of students who will be remaining at school for lunch. It is important for the school's safety procedures that you be as specific as possible. For example, if your child will not be staying for lunch **every** day, please note the **specific day(s)** of the week when he/she will be staying.

Note: if a regular lunch student will be leaving school property during the lunch hour, the school must be notified in writing by a parent or guardian.

LUNCH PLAN

Please select one:

- My child will be going home for lunch every day.
- My child will stay at school for lunch every day.
- My child will stay at school for lunch only on **Special Event days** (i.e. hot lunch day).
- My child will stay for lunch only on the following day(s) – please specify dates and days of the week.:

Parent/Guardian Signature _____

Date _____

To be Completed by: Parent/Guardian

Description of Use: 1. File form with Classroom Teacher;
2. Information available in Main Office (Retain: Current School Year)