

# Letter to Parent/Guardian Explaining Requirements for School Meal Modification Requests

Dear Parent/Guardian:

Your student's school will make meal modifications prescribed by a licensed medical authority that is authorized by Kansas state law to write medical prescriptions (MD, DO, PA, or APRN) to accommodate a disability. A prototype *Medical Statement to Request School Meal Modification* is on our website, [www.usd397.com](http://www.usd397.com) Under Menu/Enrollment /Printable Enrollment Forms and can be used to request a meal modification.

**IMPORTANT:** For a student who does not have a disability, a request for meal modifications can be made and the school **MAY** choose to make substitutions. Any modification of this kind must meet the reimbursable meal pattern.

If you have questions or need assistance, please call the District Office at 785-983-4304.

Sincerely,

Larry Geist  
Superintendent

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- (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).

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