



NUTRITION SERVICES

1904 Allen Street • Kelso, WA 98626 • 360.501.1807 • nutrition.resource@kelsosd.org

ELECTIVE REFUSAL OF SCHOOL MEALS FORM

Parent or Guardian Name: _____

School year: 2023-2024

Student(s) name: _____

School: _____

Circumstance of refusal (choose one):

- ☐ No à la carte/single item purchases.
- ☐ When there is no money on the account.
- ☐ At all times, regardless of account balance.
- ☐ Other: _____

Dates of refusal: (effective no sooner than date received by NS office)

/ / to / /

☐ Entire school year

According to WA state law HB 2610, all students are entitled to a meal regardless of their meal account balance. Once a meal has been **served** to a student, Nutrition Services staff, according to HB 2610, cannot remove the meal from the child's possession. If a child disregards parent/guardian wishes and collects a school meal prior to the cashier terminal, staff cannot remove the meal; *the child will be allowed to eat the meal and their account will be charged accordingly.*

- The **first time** this occurs, the parent/guardian will be contacted and the child will be reminded of the restrictions placed on their account.
- The **second time** this occurs, the parent/guardian will be contacted, the child will be reminded of the restrictions on their account and warned that continuing to disregard the limits placed on their account could result in an office referral.
- If there are more than **two** attempts to collect a meal regardless of parent/guardian wishes, the child will be referred to the school office for intervention/disciplinary action.

Please discuss this form with your student prior to turning it in so they are aware of the restrictions on their account and of the potential consequences of disregarding the restrictions you have put in place.

By signing below you give nutrition services staff the right to refuse a meal to your student based on the circumstances checked above. You understand and agree to the terms when a child does not follow these requests. This form will expire at the end of the school year.

Signature: _____

Date: _____

FOR OFFICE PURPOSES ONLY:

- ☐ Add wandering message to student profile
- ☐ Send copy of form to kitchen
- ☐ Email kitchen lead