Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Head Start Program Performance Standards require all Early Head Start programs to provide meals and snacks that meet USDA requirements at no cost to the family. To ensure nutritional needs are met, NMCAA Early Head Start Learning Centers follow LARA Child Care Licensing Rules, Head Start Program Performance Standards, and Child and Adult Care Food Program (CACFP). These rules and requirements provide minimum standards for nutritious and safe meal service. Additionally, the foods provided must reflect the home and community cultures and be high in nutrients and low in fat, sugar, and salt.

Parents who have concerns about the food provided should work first with teaching staff/Center Assistant and then with program administration to improve food choices. In the event families choose to adopt specialized diets, parents may elect to provide food from home for their child although this is not expected. The food provided from home must also meet nutritional requirements except when documented food allergies/intolerances or family beliefs prohibit.

If you wish to send food from home for your child, please check all that apply:

□ I understand the decision to provide food for my child is optional.

□ I will provide food for all meals for my child.

□ I will provide food for all snacks for my child.

□ I will provide certain foods for my child.

□ I will provide breastmilk for my child in place of formula or milk provided by the center.

□ I will provide a milk substitute.

□ I understand the foods I provide must meet the requirements provided to me by the program AND I understand that if the foods I provide do not meet the requirements, program staff will support me to meet them; and if I continue to provide foods that do not meet the requirements, my option to provide food from home for my child may be withdrawn.

I decided to provide these items for my child for the following reason:

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In the event that I do not provide the food/breastmilk/milk substitute listed above to my child’s center (i.e., forgotten, dropped, etc), I grant permission for NMCAA staff to provide my child meals and snacks in accordance with the food service plan for all children, including formula if applicable. If medically documented food allergies or intolerances prohibit consumption from the center’s food service plan, NMCAA staff will provide the agreed upon alternative listed below. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Parent signature Parent name (print) Date

□ I have explained that the choice to provide food for the child is optional.

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Teacher signature Teacher name Date

**If requested to serve anything but cow’s milk/lactaid, call Sandy at 231-346-2135.**