Special Dietary Needs Form
SCHOOL YEAR 2022-2023
Division of Food & Nutrition Services
MONTGOMERY COUNTY PUBLIC SCHOOLS
Gaithersburg, Maryland 20879

SECTION A—MUST BE COMPLETED BY THE PARENT/GUARDIAN

Name of Student ____________________________________________________________
Student ID ___________ Grade ______

School Name _______________________________________________________________________
School Number __________

Teacher Name _______________________________________________________________________________________

Parent/Guardian Name (printed) _____________________________________________________________

Parent/Guardian Signature ________________________________________________________________________

Email _______________________________________________________________________________________

Phone Number _____-_____-______ Date ____/-____/-____

SECTION B—MUST BE COMPLETED BY PHYSICIAN

Does the student have food allergies?  Yes  No

If yes, please select the allergen from the list below

- Wheat
- Tree Nuts
- Peanuts
- Dairy
- Eggs
- Fish
- Milk baked in products are ok
- Eggs baked in products are ok
- Shellfish
- (i.e. pancakes)
- (i.e. pancakes)
- Soy
- Soybean Oil is OK
- Sesame
- Milk baked in products are ok (i.e. pancakes)
- Soybean Oil is OK
- Sesame
- Other:_____________________________________________

Other:_____________________________________________

Does the student have other special nutritional or feeding needs?  Yes  No

Please describe the special diet/feeding needs such as modified textures (i.e. pureed), celiac disease, diabetes, etc.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I certify that the above-named student needs special school food as described above,

Physician’s Name (printed) ___________________________________ Office Number _____-_____-______

Physician’s Signature ___________________________________ Date ____/-____/-____

This institution is an equal opportunity provider.
Procedure for Special Dietary Needs
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Background information:
The Americans with Disabilities Act (ADA) states that most physical and mental impairments constitute a disability. MCPS Division of Food and Nutrition Services (DFNS) works collaboratively with parents and other district staff to ensure an equal opportunity to participate in the school meal programs and receive program benefits. Schools are required to make substitutions to meals for students with a disability; these substitutions are on a case-by-case basis and only provided when supported by a written statement from a state-licensed healthcare professional—such as the Special Dietary Needs Form (page 1). Schools are required to make reasonable accommodations for students with disabilities that directly affect their diet. General health concerns, such as a preference that a student eat a gluten-free diet because a parent believes it is better for the student, are not disabilities and do not require accommodation. DFNS will design a meal plan within the nutrition program meal pattern to accommodate common disabilities. In most cases, disabilities can be managed within the meal pattern requirements. DFNS is not required to provide the specific substitution or other modification requested but will offer a reasonable modification that effectively accommodates the student’s disability and provides equal opportunity to participate in or benefit from the program.

Procedure:
Once the Special Dietary Needs Form has been completed, the form is emailed to DFNSOffice@mcpsmd.org to be received by the clerical staff at DFNS central office. If the Special Dietary Needs Form has been completed, including the physician’s signature, the form is passed along to the registered dietitians who then reach out to the parent(s)/guardian(s) regarding planning a menu for the student. After the registered dietitian and parent(s)/guardian(s) have agreed upon a menu plan, the plan is then sent to the school-based supervisor to begin training the staff and aiding in food ordering if necessary. The menu is posted in a secured location within the school cafeteria, where the cafeteria manager and staff can access it. Some students may require their meals to be compiled and set aside for them to ensure the prevention of cross-contamination. Please note: the Special Dietary Needs Form is to be utilized independently or in addition to a 504 plan.