

2021-2022 MADISON School District

EGG-SAFE MENU Only with documented allergy



Mondays (M) All-White Meat Chicken Tenders w/ a Dinner Roll

Tuesdays (T) Sabrett All-Beef Hot Dog on a Bun

Wednesdays (W) Grilled Chicken Sandwich
Thursdays (TH) Cheeseburger on a Bun
Fridays (F) Personal Cheese Pizza

Available Daily 1 Bagel Bag w/ Yogurt & String Cheese

Available Daily 2 Turkey & Cheese Sandwich

Available Daily 3 Ham & Cheese Sandwich

A Complete Lunch Includes:

Entrée (with Protein/Grain)

Fruit/Vegetable

Milk

Important consideration when deciding to participate in Egg-Safe school lunch offerings:

Pomptonian's staff prepares and cooks a wide variety of meals and does not have separate equipment and space for egg-safe (ES) meal preparation. To minimize the chance for cross-contamination, the ES items that are available for pre-order, are prepared by trained staff with, as per the manufacturer's label, egg-safe ingredients.

| Cut at this line | and keen the | ahove menu | portion for | r vour reference. |
|------------------|--------------|------------|-------------|-------------------|
| Cut at this line | ano keeb ine | above menu | DOLLION 101 | vour reierence. |

Please submit lunch forms promptly. Late submissions may not be properly recorded.

"This institution is an equal opportunity provider."

Please use the numbers/codes listed above to indicate your selections *for the month* on the order form below and return it by 1 week prior in an envelope to your school cafeteria. It is important to go over the menu with your child. If your student is going to be absent on a day that lunch was ordered, please call the Food Service Director at 973-509-4100 x4256 between 8:00 & 8:30 a.m. the morning the student is to be absent.

| MONTH: | MON | TUE | WED | THU | FRI | |
|----------|-----|-----|-----|-----|--------------------------|-------------------------|
| Week of: | | | | | | STUDENT'S NAME |
| Week of: | | | | | | GRADE/TEACHER |
| Week of: | | | | | | SCHOOL |
| Week of: | | | | | | PARENT/GUARDIAN PHONE # |
| Week of: | | | | | | PARENT/GUARDIAN E-MAIL |
| | | | | | NUMBER OF MEALS SELECTED | |

NOTE TO FREE LUNCH RECIPIENTS: If you plan to participate in the lunch program, you **must** fill out and return this form.