

## 2021-2022 Jefferson Township School District

**SOY-SAFE MENU** Only with documented allergy



Mondays (M) All-Natural Chicken Tenders w/ Tortilla Rounds

Tuesdays (T) Pizza Crunchers

Wednesdays (W) Boneless Chicken Wings w/ Tortilla Rounds
Thursdays (TH) Breaded Chicken Fillet w/ Tortilla Rounds

Fridays (F) PizzaBoli

Available Daily 1 Turkey & Cheese Roll-Up w/ Tortilla Rounds
Available Daily 2 Ham & Cheese Roll-Up w/ Tortilla Rounds

A Complete Lunch Includes: Entrée (with Protein/Grain) Fruit/Vegetable Milk

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

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

| Cut at this line and keep the above | menu portion for your reference.              |
|-------------------------------------|---|
| Please submit lunch forms promptly. | Late submissions may not be properly recorded |

"This institution is an equal opportunity provider."

Please use the number 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 Food Services Director Eric Ventriglia at 973-697-3106, ext. 5878 between 8:00 & 8:30 a.m. the morning the student is to be absent.

| MONTH:        | MON | TUE | WED | THU | FRI |                          |
|---------------|-----|-----|-----|-----|-----|--------------------------|
| Week of: 9/6  |     |     |     |     |     | STUDENT'S NAME           |
| Week of: 9/13 |     |     |     |     |     | GRADE/TEACHER            |
| Week of: 9/20 |     |     |     |     |     | SCHOOL                   |
| Week of: 9/27 |     |     |     |     |     | PARENT/GUARDIAN PHONE #  |
| Week of: 10/4 |     |     |     |     |     | 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.