

Kutztown University Dining Services Bagged Meal Request Form



| NAME:_ | | | CELL PHONE # | | |
|---------|---|------------------------|--|-----------------------|------------------|
| Email A | ddress: | @live.kutztown.ed | lu | | |
| 16 DIGI | T STUDENT ID #: | | | | |
| | | • • • | e(s) Date Format: (mm/o Wednesday | | Friday |
| WHY A | RE YOU REQUESTING | A MEAL: (Please mar | k one) | | |
| | Shar | idan Arts Student | Student Teache | r Class Field | Trip Internship |
| WHICH | MEAL DO YOU NEED | | Lunch Dinne | r | |
| PLEASE | CHOOSE FROM THE | FOLLOWING OPTIONS | S: (Please check your s | elections) | |
| Bag lun | ch will include, Wh | ole Fruit, Chips, a Sv | veet Treat and your s | elected sandwich as | outlined below: |
| Choose | your sandwich: | | | | |
| | Turkey and Che | ddar (please be sure | you have access to r | efrigerator storage) | |
| | Ham and Cheese (please be sure you have access to refrigerator storage) | | | | |
| | Tuna Salad (please be sure you have access to refrigerator storage) | | | | |
| | Peanut Butter and Jelly | | | | |
| | Three Cheese Sa | andwich (Vegetarian | ı) (please be sure you | have access to refri | gerator storage) |
| Need m | (please be sure | = | ing: refrigerator storage) ple below to create you | ır own personal bagge | d meal menu. |
| | Monday | Tuesday | Wednesday | Thursday | Friday |
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<u>PLEASE READ-</u>Once you have completed this form, you will need to rename the file email it as an attachment to: **kubaggedmeak@kutztown.edu**.