



## St. Francis Cathedral School of Metuchen

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

**GLUTEN-FREE  
STUDENTS MUST  
ORDER FROM THIS  
MENU ONLY**

<b>Mondays (M)</b>	All-Natural Chicken Tenders w/ Tortilla Rounds
<b>Tuesdays (T)</b>	Sabrett All-Beef Hot Dog on a Bun
<b>Wednesdays (W)</b>	All-Natural Chicken Tenders w/ Tortilla Rounds
<b>Thursdays (TH)</b>	Hamburger on a Bun
<b>Fridays (F)</b>	Cheese Pizza

**Available Daily 1 (AD1)** Thumann's Turkey Sandwich

**Available Daily 2 (AD2)** Thumann's Ham Sandwich

**A Complete Lunch Includes:**

Entrée (with Protein/Grain)

**Fruit/Vegetable**

Milk

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

Pomptonian's staff prepares and cooks a wide variety of meals and does not have separate equipment and space for gluten-safe (GS) meal preparation. To minimize the chance for cross-contamination, the GS items that are available for pre-order, are prepared by trained staff with, as per the manufacturer's label, gluten-safe ingredients. Pomptonian works with manufacturers with Good Manufacturing Practices; however, foods may be produced in a facility containing known allergens.

**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.*

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Please use the 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. **Please be sure to put money on your child's account prior to placing orders.** 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 732-548-0100 EXT 229 between 8:00 & 8:30 a.m. the morning the student is to be absent.

MONTH:	MON	TUE	WED	THU	FRI
Week of:					
Week of:					
Week of:					
Week of:					
Week of:					

STUDENT'S NAME \_\_\_\_\_

GRADE/TEACHER \_\_\_\_\_

SCHOOL \_\_\_\_\_

PARENT/GUARDIAN PHONE # \_\_\_\_\_

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.

**GS**