



ENAVIDES CHILD NUTRITION DEPARTMENT

After School Snack Request

Teacher: _____

Date: _____

Content Area: Reading Math Science Social Studies

Grade Level: Pre-K K 1ST 2ND 3rd 4th 5th 6th

of Students: ____

*Snack request must be turned in before 12:00pm.Thank you!

After School Snack Request

Teacher: _____

Date: _____

Content Area: Reading Math Science Social Studies

Grade Level: Pre-K K 1ST 2ND 3rd 4th 5th 6th

of Students: ____

*Snack request must be turned in before 12:00pm.Thank you!

After School Snack Request

Teacher: _____

Date: _____

Content Area: Reading Math Science Social Studies

Grade Level: Pre-K K 1ST 2ND 3rd 4th 5th 6th

of Students: ____

*Snack request must be turned in before 12:00pm.Thank you!

After School Snack Request

Teacher: _____

Date: _____

Content Area: Reading Math Science Social Studies

Grade Level: Pre-K K 1ST 2ND 3rd 4th 5th 6th

of Students: ____

*Snack request must be turned in before 12:00pm.Thank you!