



Student Lunch Program Volunteer For 4th, 5th and 6th grade students

Name of Student/s _____

has/have permission to work in the school cafeteria during the 2010-2011 school term. Students will be assigned to work on a rotating schedule.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian's Name: _____

(Please print)

Please return this completed and signed form to the school office.