Jeffco Food and Nutrition Services offers a la carte offerings daily to our students. A la Carte include single items offered in addition to or separate from the reimbursable meal such as: bottled beverages, milk, extra entrees, snack items, etc.

We support each family’s decision to allow or not allow their child(ren) to purchase additional a la carte items. If you choose to limit your child’s purchase of a la carte, these choices can be made online using your School Café account at [www.schoolcafe.com/Jeffco](http://www.schoolcafe.com/Jeffco) or by using this form.

All items sold a la carte must meet all Federal regulations regarding nutritional standards. Snack items must be whole grain or the 1st ingredient must be a fruit, vegetable, dairy or protein food and must meet the standards below:

- **Calories**
  - Snacks: less than or equal to 200 calories
  - Entrées: less than or equal to 350 calories

- **Sodium**
  - Snack Items: less than or equal to 230 mg
  - Entrée Items: less than or equal to 480 mg

- **Total Fat**
  - Less than or equal to 8 grams
  - Less than or equal to 6 grams

- **Saturated Fat**
  - Less than or equal to 3 grams
  - Less than or equal to 2 grams

- **Trans Fat**
  - Zero grams

- **Sugar**
  - Less than or equal to 8 grams
  - Less than or equal to 5 grams

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**Do not complete if no a la carte limitations are needed.**

Student name (please print) ___________________________________________

Student ID Number _________________ Student School _____________________________

May use his/her student meal account for a la carte purchases with the following limits:

Limit to _______(#) a la carte items per day or

Do NOT allow CASH purchases on the following days:

- [ ] Monday  
- [ ] Tuesday  
- [ ] Wednesday  
- [ ] Thursday  
- [ ] Friday

Do NOT allow DEBIT purchases (from lunch account) on the following days:

- [ ] Monday  
- [ ] Tuesday  
- [ ] Wednesday  
- [ ] Thursday  
- [ ] Friday

**Special Instructions** (different from the list above, please list below):

____________________________________________________________________________

Parent or Guardian Signature ___________________________ Date ___________________________

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Please return to your Cafeteria manager.