

Request Form: Use of the School Cafeteria or Kitchen

Send request at least one week prior to event

SCHOOL NAME _____ DATE OF EVENT _____

A "Use of Facilities" form has been submitted to the Director of Facilities Management for approval of this event.

____ Yes ____ No **If no request has been submitted, please do so immediately. Approval for use of the school cafeteria or kitchen will not be given without an approved form signed by the Director of Facilities Management.**

TIME OF THE EVENT _____

TIME YOU WILL NEED TO BE IN THE CAFETERIA:

DATE: _____ FROM: _____ UNTIL _____

DATE: _____ FROM: _____ UNTIL _____

Name of School Group or Organization requesting use of the School Cafeteria outside of the regular school day:

MAILING ADDRESS:

(if other than the school address)

NAME OF CONTACT PERSON:

TELEPHONE: _____ WORK: _____ CELL: _____

1. What is the primary purpose of the meeting for which you are requesting the use of the school cafeteria/kitchen outside of the regular school day?

If an extra garbage dumpster is needed for the event/fair/festival, then the arrangements must be negotiated separate from the regularly scheduled garbage pick-ups. Please initial if there is a need for an extra garbage dumpster for the event.

_____ Initial

2. What is the menu for this event?

3. Are you having the food catered by an outside caterer? _____ Yes _____ No
Please provide the name, address, and telephone number for the caterer.

4. Provide a copy of the caterer's "Permit to Operate" issued by the County/Parish Health Department.
Please be advised that the caterer should keep a sample plate of food for 48 hours.
Initial if the person preparing the food does not have a "Permit to Operate"

_____ **Initial**

5. If an outside caterer is preparing food for the event, the school kitchen nor any cooking or serving equipment, disposable plates, cutlery, garbage liners, cleaning supplies, etc. may be used.

_____ **Initial**

6. If Child Nutrition Program staff prepares the meal, volunteers may assist in serving the food, assembling food items, such as sandwiches, wiping tables, sweeping the kitchen/dining room, or cleaning the serving line.
Volunteers cannot operate any of the kitchen equipment. Volunteers must have on a hair restraint, remove jewelry, wear closed (heel and toe) skid-proof shoes with socks, wear clean clothes including a shirt with sleeves and wear an apron if they assist with any food handling.

7. Who will be responsible for wiping the tables/chairs and cleaning the dining room floors after the event?

Name: _____ Title: _____

8. Who will be responsible for returning the cafeteria tables/chairs to the proper place in the dining room, ready for the next school breakfast or lunch period?

Name: _____ Title: _____

9. Who will be responsible for taking out the garbage after the event is over?

Name: _____ Title: _____

10. Identify the name of the employee who will be responsible for locking and securing the cafeteria if no Child Nutrition Program personnel are required to be on premise?

Name: _____ Title: _____

Approximate Time of Closure: _____

I understand that I will be invoiced in the amount listed on the "Facilities Usage Form" for any activity taking place in the cafeteria/kitchen on a "**for profit**" basis. I also understand that a Child Nutrition Program employee's time for kitchen supervision and/or food preparation will be included on the invoice if the kitchen is needed for the event.

Signature of Responsible Person

Print Name of Responsible Person

DATE _____

Cafeteria Manager's Signature

DATE _____

School Principal Signature

DATE _____

Approval: _____
Child Nutrition Program Director of Operations Signature

DATE _____

Days and Cost of Rental: _____

Employee, Hours, Rate of Billing: _____

Copy To: Child Nutrition Program Manager _____ Person Requesting Use of Cafeteria/Kitchen _____
Principal _____