



# Nottinghamshire County Council

**PAGE 1**

This form is for parents to complete if your child has a special dietary requirement. The information provided will be used to inform the School and School Caterers when providing meals for your child. **Please return this form to the school office to start the Special Diet Registration process.**

SECTION 1. DETAILS OF THE PUPIL			
Pupil's name:			
School name:			
School address (including postcode):			
Gender:		Date of Birth:	
SECTION 2. CONTACT DETAILS			
Name of contact:			
Email address:			
Daytime telephone number:		Mobile telephone number:	
Relationship to pupil:			
Address (including postcode)			
SECTION 3. DIET DETAILS - PLEASE TICK THE BOX THAT APPLIES			
<b><u>Dietary Preferences</u></b>			
Vegetarian		Pescatarian (Eats fish)	
Vegan		No Beef	
		No Pork	
		Other	
<b><u>Food allergies</u></b>			
Celery		Lupin	
Crustaceans		Milk	
Eggs		Molluscs	
Fish		Mustard	
Gluten		Peanuts	
		Sesame	
		Soya	
		Sulphur dioxide	
		Tree Nuts	
		Other	
<b><u>Medical diet</u></b>		Diet Type:	
Please provide more details			
<b>SECTION 4- CHEF'S GUIDANCE</b>	<p><b>Vegetarian-</b> No need to register, provide parent with vegetarian menu  <b>Vegan-</b> No need to register, provide parent with vegan menu  <b>Pork free-</b> Register with SD, provide parent with vegetarian/substitute menu  <b>Beef free-</b> Register with SD, provide parent with vegetarian/substitute menu  <b>Nut free-</b> Register with SD – Nut free kitchen- Check substitutes  <b>Allergen or Intolerance-</b> Register with SD- Complete menu  <b>Medical Diets-</b> Register with SD- Complete menu  <b>File paperwork for all diets in blue special diet file</b></p>		

<p><b>SECTION 5. ACTIONS DISCUSSED</b>                  A menu <b>must</b> be provided to the pupil upon registration and each menu cycle</p> <p>If the pupil's dietary needs change, a <b>new EC46 must be completed</b>, and a new menu designed with the parent/carer).</p>	<p><b>CHEF TO COMPLETE</b></p>
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**SECTION 6. PARENT/CARER SIGNATURE**

Signed:		Date:	
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To be completed by school representative (to agree above actions and accept responsibility to inform school staff of the agreed diet):

PRINT NAME:		SIGNATURE:	
DATE:		POSITION:	
DATE OF REGISTRATION:		SCHOOL CHEF SIGNATURE:	

Date of meeting:	TO BE COMPLETED AT EACH NEW MENU Comments/updates/actions: (Chef complete menu cycle update form on Cypad)	Parent/carer signature:	School chef signature:

It is the responsibility of the parent/carer to notify both the school chef and the school office in writing of any changes to dietary requirements previously agreed. Any queries please contact [SpecialMedicalDietEnquiries@nottsc.gov.uk](mailto:SpecialMedicalDietEnquiries@nottsc.gov.uk)

We collect the above data in order to help us provide school catering services. We will store it securely and manage it in accordance with GDPR principles. For more information, please see <https://www.nottinghamshire.gov.uk/media/1533665/schoolcateringandfacilitiesprivacynotice.pdf>