

Purpose: Establish a procedure for requesting food for special functions

Policy: Food prepared and served for special functions is charged to recover full cost.  
Special functions cannot use food and labor charged to state and federally funded breakfast and lunch programs

Procedure:

- 1) Requests for food for special functions needs to be approved by the Principal or Departmental Manager (Form 303A).
- 2) Request food a minimum of two weeks in advance of the function. Advance notice is necessary to allow the purchase of food and scheduling of personnel.
- 3) Complete the special functions request form noting:
  - Name of group
  - Date of function
  - Location food will be picked-up
  - Time of food pick-up
  - Location food will be served
  - Food requested
  - Number people attending function
  - Name and address of person responsible for payment
- 4) Send the approved request form to the Cafeteria Manager.
- 5) The Cafeteria Manager will prepare an invoice to the responsible person within five (5) days of the function. The invoices should be sent to the Food Service Central Office for approval. Food Service Central Office will forward a copy of the bill to the customer and comptroller.
- 6) Payment will be due within thirty (30) days after receiving the invoice.
- 7) Checks are made payable to Rock Island Public Schools and returned to the Comptroller.
- 8) Small functions can be rung through the register such as dozen cookies and a variety of drinks. This catering income will be part of ala carte sales.

**FOOD REQUEST FORM FOR SPECIAL FUNCTIONS**

**NOTIFICATION TIME LINE:**

**At least two weeks notification is required to assure that requests for special functions can be accommodated. Cafeteria Managers order food once a week.**

Date: \_\_\_\_\_

To: Cafeteria Manager

Name of Group: \_\_\_\_\_

Date of Function: \_\_\_\_\_

Location of Food Pick-up: \_\_\_\_\_

Time of Pick-up: \_\_\_\_\_

Location food will be served: \_\_\_\_\_

Food Requested:

_____	Cakes	_____	Cookies
_____	Muffins	_____	Doughnuts
_____	Fruit Platter	_____	Meat/Cheese Platter
_____	Chili	_____	Tacos
_____	Coffee	_____	Punch

Menu:

Labor Requested: \_\_\_\_\_

Number to be Served: \_\_\_\_\_

Name of Person Responsible for Payment: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_