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Medical Disability Statement for Food Substitution(s) – Child Care

PART I – CHILD INFORMATION

Child's Name: ____________________________________________________________

The child identified above has a disability that restricts the child’s ability to drink cow’s milk, soy milk or consume other food(s).

An individual with a disability is described under Section 504 of the Rehabilitation Act (1973) and the Americans with Disabilities Act (ADA) as a person who has a physical or mental impairment that substantially limits one or more major life activities/bodily functions. Refer to the end of this document for definitions of “disability” and “major life activities/bodily functions”.

PART 2 – TO BE COMPLETED BY PHYSICIAN

- Identify the child’s disability: __________________________________________
- Identify the major life activities/bodily functions affected by the disability: __________________________________________
- Describe how the disability restricts the child from drinking cow’s milk and approved brands of soy milk (8th Continent Soymilk – Original and Vanilla, Pacific Ultra Soy – Original and Vanilla, Great Value Original Soymilk, Kirkland Organic Soymilk - Plain) or consuming other food item(s).
- Prescribed food substitute(s): __________________________________________

Dietary accommodations must be provided by the child care facility at no charge to a child with a disability unless the parent chooses to provide the food substitute(s).

PART 3 – SIGNATURE OF LICENSED PHYSICIAN

Clinic Name: __________________________________ Phone: __________________________

Name of Licensed Physician (please print): _______________________________________ Phone: __________________________

Signature: __________________________ Date: __________________________

(MD – Medical Doctor or DO - Doctor of Osteopathy)

PART 4 – DEFINITIONS

“A Person with a Disability” is defined as any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment. “Physical or Mental Impairment” means (a) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive, digestive, genitourinary; hemic and lymphatic; skin; and endocrine; or (b) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. “Major Life Activities” are functions such as caring for one’s self, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating and working. “Major Life Activities” now include “Major Bodily Functions” such as functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, and reproductive functions. “Has a Record of Such an Impairment” is defined as having a history of, or has been classified as having a mental or physical impairment that substantially limits one or more major life activities. Citations from Section 504 of the Rehabilitation Act of 1973.

This institution is an equal opportunity provider.

Office of Superintendent of Public Instruction/Child Nutrition Services
July 2013
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