

## PARENT/GUARDIAN REQUEST FOR FLUID MILK SUBSTITUTION

Parents/guardians may request in writing that a **non-dairy beverage** be substituted for fluid milk for their child(ren) with special dietary needs without providing a statement from a medical authority. The Agency or the parents/guardians may provide the non-dairy beverage.

The non-dairy beverage provided must be nutritionally equivalent to fluid milk and meet the nutritional standards set by the United States Department of Agriculture (USDA) for Child Nutrition Programs in order for the Agency to claim reimbursement for the meal through the Child and Adult Care Food Program (CACFP).

A non-dairy beverage provided must at a minimum contain the following nutrient levels per cup (8 fluid ounces) to qualify as an acceptable milk substitution:		
a. Calcium 276 mg	d. Vitamin D 100 IU	g. Potassium 349 mg
b. Protein 8 g	e. Magnesium 24 mg	h. Riboflavin .44 mg
c. Vitamin A 500 IU	f. Phosphorus 222 mg	i. Vitamin B-12 1.1 mcg

To be completed by CACFP participating Agency prior to distribution of form		
Name of Agency:		
<b>Choose One</b>		This Agency will provide the following non-dairy beverage which meets the USDA nutrient standards for a milk substitute: <i>(list substitute(s))</i> :
		This Agency has chosen not to provide non-dairy beverages for the substitution of fluid milk.

To be completed by Parent/Guardian and returned to Agency		
Child's Full Name:		
Identify the medical or other special dietary need that restricts the diet of your child (why your child needs a non-dairy beverage as a milk substitute):		
<b>Choose One</b>		I request that my child is served the non-dairy beverage provided by the Agency, as indicated above, which meets the USDA nutrient standards for a milk substitute.
		I am aware that the Agency is not providing a non-dairy beverage for the substitution of fluid milk. I will provide a non-dairy beverage for my child that meets the USDA nutrient standards for a milk substitute. I will provide either <input type="checkbox"/> An approved substitution listed on the back of this form or <input type="checkbox"/> Documentation to show the substitution meets the nutrient standards (see back of form for more information on this requirement).
		I will provide a non-dairy beverage for my child that does <b>not</b> meet the USDA nutrient standards for the substitution of fluid milk. I understand that the Agency cannot claim meals that require milk unless I get a written statement from a recognized medical authority.
Signature of Parent/Guardian:		Date:

**NON-DISCRIMINATION STATEMENT:** In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

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**NON-DAIRY BEVERAGES\* MEETING USDA APPROVED NUTRIENT STANDARDS  
PER EIGHT FLUID OUNCES**

<p><i>8th Continent</i> <b>Original Soymilk</b></p> 	<p><i>8th Continent</i> <b>Vanilla Soy milk</b></p> 	<p><i>Pacific</i> <b>All Natural Ultra Soy Original</b></p> 	<p><i>Pacific</i> <b>All Natural Ultra Soy Vanilla</b></p> 	<p><i>Kikkoman</i> <b>Pearl Organic Soymilk Smart Original</b></p> 	<p><i>Kikkoman</i> <b>Pearl Organic Soymilk Smart Creamy Vanilla</b></p> 
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<p><i>Kikkoman</i> <b>Pearl Organic Soymilk Smart Chocolate</b></p> 	<p><i>Walmart Great Value</i> <b>Original Soymilk</b></p> 	<p><i>Sunrich Naturals</i> <b>Original Soymilk</b></p> 	<p><i>Sunrich Naturals</i> <b>Vanilla Soy milk</b></p> 	<p><i>Silk</i> <b>Original Soymilk</b></p> 	<p><i>Kirkland Signature</i> <b>Organic Soymilk Plain</b></p> 
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\*The Wisconsin Department of Public Instruction does not endorse the companies or products listed. This chart is for informational purposes only. Contact the manufacturer at the time of purchase to ensure that product formulations have not changed.

**DOCUMENTATION TO SHOW NON-DAIRY BEVERAGE MEETS THE NUTRITION STANDARDS**

If you prefer to provide a non-dairy beverage not on the approved list above, a copy of the Nutrition Facts label must be provided to the Agency in order to determine if it meets the USDA nutrient standards for a milk substitute.

NOTE: Almond milk, rice milk, and coconut milk do not contain enough protein to meet the USDA nutrient standards for a milk substitute.

**Nutrition Facts**  
Serving Size 1 cup (8 fl oz)  
Servings Per Container 4

Amount Per Serving	
Calories 90	Calories from Fat 0
<b>Total Fat</b> 4g	7%
Saturated Fat 3g	3%
Trans Fat 0g	0%
Cholesterol 0mg	0%
Sodium 7mg	4%
Total Carbohydrate 12g	12%
Dietary Fiber 4g	1%
Sugars 2g	8%
<b>Protein</b> 9g	
Vitamin A 2%	Vitamin C 0%
Calcium 2%	Iron 8%

\*Percent Daily Values are based on a 2,000 calorie diet.

*Sample*

<b>To be completed by Agency</b>
<b>Name of Product:</b>
<b>Enter information from nutrition facts label into the non-dairy beverage tool calculator*</b> (Guidance Memo webpage: Under Guidance Memo 12, Special Dietary Needs).
<b>Does the product meet the USDA nutrient standards for a milk substitute?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<i>*Attach a copy of the completed non-dairy beverage tool calculator to this form.</i>