November 12, 2013

Dear A.E.A parents and caregivers,

For the month of November, the students will be using flour, vegetable oil and salt. The food items *will be handled but not eaten*. Please return the permission slip promptly.

Thank you,

Mrs. Rassekhi

6th Grade Science Teacher

My child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, has permission to participate in lab activities where flour, vegetable oil and salt will be handled.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Caregiver Signature Parent/Caregiver Name Printed

\*Please list any known allergies to the above mentioned food items. If none write N/A.

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