

Special diet requests will not be accommodated without a 2025 – 2026 school year diet prescription form on file.

More Info: Special Dietary Needs

Applesauce, Soft WG Roll

Orange Wedges



FREE MEALS for ALL STUDENTS

Community Eligibility Provision (CEP)

All enrolled students are eligible to receive ONE breakfast meal and ONE lunch meal at no cost for the 2025 - 26 school year.

No need to apply for free/reduced-price meals

Chilled Grapes

More Info: Special Dietary Needs		International School of Louisiana		No need to apply for free/reduced-price meals.		
Monday	Tuesday	Wednesday	Thursday	Friday	FYI	
Pay for extra meal items at www.myschoolbucks.com Extra food items: Funds must be available at the time of service.		WHAT'S ON YOUR PLATE? Froats Frodein MyPlate.gov	Fruits MyPlate.gov	Vegetables MyPlate.gov	Flavored and non-flavored milk served with all meals. (Skim and 1%)	
	NEW DELICIOUS MENU ITEMS					
Grains MyPlate.gov	Protein MyPlate.gov	13 BREAKFAST Assorted WG Cereal, Graham Crackers, Banana, Fruit Juice LUNCH Roasted Rosemary Chicken Garlic Roasted Potatoes Steamed Green Beans Frozen Strawberry Cups Soft WG Roll	14 BREAKFAST Turkey Sausage Biscuit, Breakfast Potatoes, Juice LUNCH Cheese Ravioli Steamed Broccoli Florets Chilled Mixed Fruit Soft WG Roll	LUNCH Hamburger on WG Bun	Menus may vary due to seasonal ingredients and vendor supply changes.	
18 BREAKFAST Assorted WG Cereal, Graham Crackers, Apple Slices, Juice LUNCH Red Beans & Rice Garden Salad Chilled Diced Peaches Warm Cornbread	19 BREAKFAST Waffles, Turkey Sausage links, Diced Peaches, Fruit Juice LUNCH Grilled Cheese Sandwich Tomato Basil Soup Celery & Carrots w/ Ranch Dip Fresh Apples	20 BREAKFAST WG Cereal, Graham Crackers, Banana, Juice LUNCH Baked Beef & Sausage Mac Steamed Mixed Veggies Caesar Salad Sliced Pears	21 <u>BREAKFAST</u> Sausage, egg & Cheese Wrap, Potatoes, Juice <u>BRUNCH</u> Chicken & Waffles Seasoned Potatoes Baby Carrots w/ Ranch D Bananas	22 BREAKFAST Breakfast Ham Biscuit, Orange Wedges, Juice LUNCH Hot dog on WG Bun Baked Beans Oip Garden Salad Apples	USDA is an equal oppportunity provider and employer	
25 BREAKFAST WG Cereal, Graham Crackers, Mandarin Oranges, Fruit Juice LUNCH Barbecue Pork Riblet Mashed Potatoes Steamed Sliced Carrots	26 BREAKFAST Pancake & Sausage Bites, Apple Slices, Fruit Juice LUNCH - Taco Tuesday Taco Salad Lettuce/Cheese Cups Refried Beans Orange Wedges	27 BREAKFAST Blueberry Muffin, Banana, Juice LUNCH Chicken Riggies Seasoned Greens Cucumber/Tomato Salad	28 BREAKFAST Sausage Croissant, Seasoned Potatoes, Juice LUNCH Deli Sub (Ham & Cheese Sandwich Salad Cup Orange Wedges	<u>LUNCH</u>	Dairy MyPlate.gov	

Chilled Mixed Fruit



SPECIAL DIET REQUESTS

Special diet requests will not be accommodated without a 2025 – 2026 school year diet prescription form on file. Forms can be found at www.isl-edu.org/foodservicesandmenu or in the front office resource center of each campus.

<u>DISABILITY SPECIAL DIET REQUESTS</u> Federal and state regulations require a completed and current diet prescription form for any student with a special diet request. Special diet request forms are available on the school's website, directly from the Food Services Department or school nurse. Special diet requests will not be processed without a current school year form on file. Special diet request form(s) must be supported by a signed statement by a licensed medical authority by the state. Menu substitutions will only be served to students with a documented medical dietary need.

Students who cannot have cow's milk due to a medical condition must have a current school year diet prescription form on file, which must include the milk substitute prescribed by the physician.

NON-DISABILITY SPECIAL DIET REQUESTS Special diet requests for personal reasons (i.e., ethnic, or religious) without a recognized medical disability may be accommodated at the discretion of the Food Services Director. The ISL Food Services Department is not required to make substitutions for non-medical reasons. However, students are allowed to refuse food items within the guidelines of offer vs. serve. Parents/guardians must submit a special diet form to the food service department for non-disability special diet requests.

Federal and State regulations require a completed and current diet prescription form for any type of change or substitution to a student's diet. The special diet prescription form will need to be completed by your child's physician or medical authority. We **will not** process a special diet request for your child until we receive the 2025 – 2026 School Year form.

The form is in the front office of each school campus and online at www.isl-edu.org/foodservicesandmenu.

NOTE If a student cannot have fluid milk because of a medical diagnosis, the Physician must prescribe the milk substitute on the Diet Prescription Form.

"Savor the Pasta Flavors of August"

ALL ISL SCHOOLS ARE CEP ELIGIBLE: FREE BREAKFAST AND LUNCH MEALS FOR ALL STUDENTS

Baked Beef and Sausage penne (August 20)



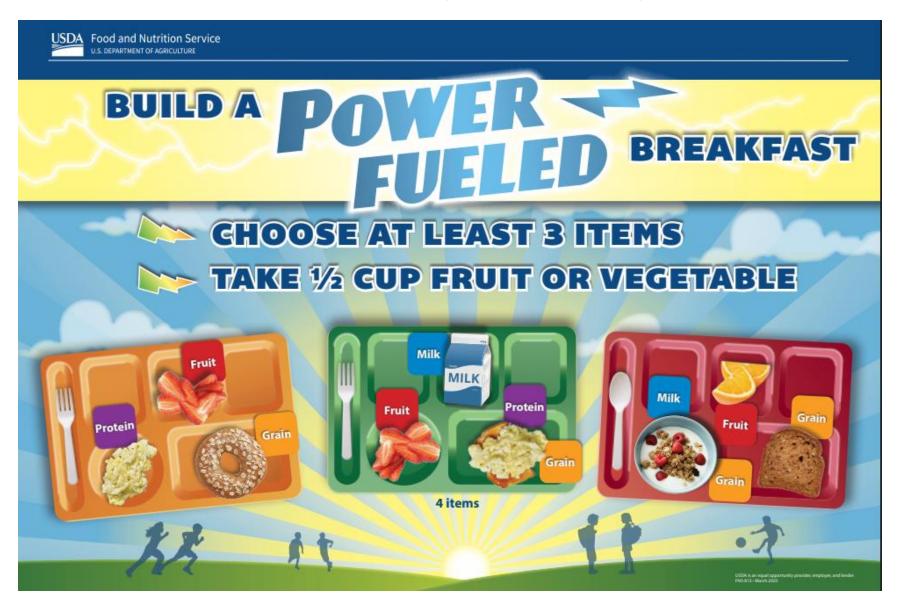
Cheese Ravioli (August 14)



Chicken Riggies (August 27)



Over Versus Serve (OVS - BREAKFAST)





ISL Café "Big Taste, Small Price"

MEAL PRICES			
Menu Item	Price		
BREAKFAST			
Student Breakfast (One FREE breakfast meal per day)	\$0.00		
Student Extra Breakfast Meal	\$4.00		
ISL Staff	\$3.00		
Visitor	\$4.00		
Milk	\$0.50		
Bottled Water (8 oz)	\$0.50		
LUNCH			
Student Lunch (one FREE lunch meal per day)	\$0.00		
Student Extra Lunch Meal	\$5.00		
ISL Staff	\$5.00		
Visitor	\$6.00		
Milk	\$0.50		
Bottled Water (8 oz)	\$0.50		

MEAL PRICES - EXTRA SALE ITEMS

Menu Item	Price
Bottled Water (8 oz)	\$0.50
Chips/Popcorn	\$1.00
Cookie	\$1.00
Frozen Treat	\$1.00
Fruit Juice (4 oz)	\$0.50
Fruit Juice (6.75 oz)	\$0.75
Fruit/Vegetable	\$1.00
Milk – Nonflavored (1% / skim), 1% choc., 1% straw.	\$0.50
Pizza (1 slice)	\$1.00
Roll/Bread	\$0.50
Themed Salad Bar (Potato, Taco, Veggie, etc.)	\$3.00
Soy/Almond Milk	\$1.50

PAY FOR EXTRA SALE ITEMS ~ A LA CARTE



Create your free MySchoolBucks account to conveniently view your student's cafeteria purchases, check their balance, and securely pay for a la carte items from anywhere.



Get Started Today!

- 1. Go to <u>myschoolbucks.com</u> or download the mobile app
- 2. Create your free account and add your students using their school's name and student ID
- **3.** View cafeteria purchases and add funds using your credit/debit card or electronic check



It's a fact that kids with health insurance live healthier lives.

Give Your Children

HEALTH COVERAGE

at NO COST or LOW COST to You.





NO enrollment fees!
NO co-payments! NO deductibles!

DO YOU QUALIFY? LaCHIP uses the income amounts below to see if a child qualifies for low-cost or no-cost LaCHIP coverage.

INCOME LIMITS				
Number of Family Members	Monthly Income (No Cost)	Monthly Income (Low Cost)		
1	\$2,831	\$3,326		
2	\$3,825	\$4,495		
3	\$4,820	\$5,664		
4	\$5,814	\$6,832		
5	\$6,809	\$8,001		
6	\$7,803	\$9,170		
7	\$8,798	\$10,339		
8	\$9.793	\$11.507		

Low Cost option allows a greater income limit at a \$50 premium All of your family income may not be counted.

The LaCHIP program covers:

- Medical services for children, including health, dental, and vision coverage
- Doctor's appointments, including well child visits and hospital stay
- · Prescriptions and immunizations
- · Mental health services
- And many other services

Visit our website to apply online:

Idh.la.gov/medicaid/lachip

or call our toll-free hotline for more information:

1-888-342-6207



Es un hecho que los niños que tienen seguro médico viven más sanos.

Deles a sus hijos

COBERTURA DE SALUD

GRATIS o de BAJO COSTO para Ud.





¡SIN cuota de inscripción! ¡SIN pagos compartidos! ¡SIN deducible!

¿CUMPLE LOS REQUISITOS? LaCHIP usa las cantidades de ingresos abajo señaladas para determinar si un niño cumple los requisitos para cobertura de LaCHIP, gratis o de bajo costo.

LÍMITES DE INGRESO			
Número de Familiares	Ingreso Mensual (gratis)	Ingreso Mensual (de bajo costo)	
1	\$2,831	\$3,326	
2	\$3,825	\$4,495	
3	\$4,820	\$5,664	
4	\$5,814	\$6,832	
5	\$6,809	\$8,001	
6	\$7,803	\$9,170	
7	\$8,798	\$10,339	
8	\$9,793	\$11,507	

La opción de bajo costo permite un límite de ingreso más alto con cuota mensual de \$50. Puede que no se cuente todo el ingreso mensual de su familia.

El programa LaCHIP cubre:

- Servicios médicos para niños, incluso cobertura de salud, dental, y de la visión
- Citas con el doctor, incluso chequeo rutinario y estadía en el hospital
- Recetas y vacunas
- · Servicios de salud mental
- Y muchos servicios además

Visite nuestro sitio Web para solicitar:

Idh.la.gov/medicaid/lachip

Llame la línea gratuita para mayor información:

1-888-342-6207



Trên thực tế, trẻ em có bảo hiểm sức khỏe sẽ khỏe mạnh hơn.

Hãy Trang Bị Cho Con

BẢO HIỆM SỰC KHỎE

MIĒN PHÍ hoặc với CHI PHÍ THẤP.





KHÔNG tính phí ghi danh! KHÔNG cần đồng chi trả! KHÔNG khấu trừ!

QUÝ VỊ CÓ ĐỦ ĐIỀU KIỆN THAM GIA KHÔNG? LaCHIP sử dụng mức thu nhập bên dưới để xem trẻ có đủ điều kiến tham gia bảo hiểm LaCHIP Chi Phí Thấp hoặc Miễn Phí không.

GIỚI HẠN THU NHẬP			
Số thành viên trong gia đình	Thu nhập hàng tháng (Miễn Phí)	Thu nhập hàng tháng (Chi Phí Thấp)	
1	\$2,831	\$3,326	
2	\$3,825	\$4,495	
3	\$4,820	\$5,664	
4	\$5,814	\$6,832	
5	\$6,809	\$8,001	
6	\$7,803	\$9,170	
7	\$8,798	\$10,339	
8	\$9,793	\$11,507	

Lựa chọn Chi Phí Thấp chấp nhận giới hạn thu nhập cao hơn với mức phí báo hiểm là \$50. Tất cá thu nhập của gia đình bạn có thể chưa được tính đến.

Chương trình LaCHIP chi trả:

- Dịch vụ y tế cho trẻ em, bao gồm bảo hiễm sức khỏe, nha khoa và nhãn khoa
- Các cuộc thăm khám với bác sĩ, bao gồm thăm khám sức khỏe định kỳ cho trẻ và nằm viện
- · Thuốc kê đơn và tiêm chung
- Các dịch vu sức khỏe tâm thần
- Và nhiều dịch vu khác

Truy cập trang web của chúng tôi để đăng ký trực tuyến:

Idh.la.gov/medicaid/lachip

hoặc gọi đến số điện thoại miễn phí của chúng tôi để tìm hiểu thêm thông tin:

1-888-342-6207

Đã sửa đối 03/25