September 2019

Dear Rochester Community Schools Families:

Rochester Community Schools is pleased to continue the nationally recognized Blessings in a Backpack program in your school to help ensure that all children have the nutritional foundation to be successful in school. This program, which is supported through private donations and the Meijer Corporation, gives eligible students enough food for three meals a day during the weekend.

Blessings in a Backpack is a voluntary program designed for families who have students enrolled in the free and reduced lunch program. As a participant in the Blessings in a Backpack program, your child will receive a Meijer grocery bag every Friday filled with food for the weekend. This may include food like macaroni and cheese, beef ravioli, fruit granola bars, peanut butter, soups, juices and other items. Please be assured that your child’s name will not be given to the volunteers who are packing the food and we will do everything possible to make sure this a positive experience. The grocery bag is generally small enough to fit into your child’s backpack. However, please be aware that because only certain students will be receiving grocery bags of food, some degree of confidentiality may be lost with your participation in this program.

If you would like to have your child(ren) participate in Blessings in a Backpack, please complete the form below and return it to the school office by Friday, September 13, for your child to have a bag of food the following week. Please note any food allergies as well. We anticipate that the first food packet will go home with students on Friday, September 20. Forms turned in after September 13 will still be eligible for the program.

If you have any questions, please do not hesitate to contact your building principal.

Sincerely,
Sharon Ahearn
Community Relations Department

☐ Yes, I would like my child(ren) to participate in the Blessings in a Backpack program.

Student Name(s) _______________________________________________________

______________________________________________________________

Food Allergies: _______________________________________________________

Parent/Guardian Name (Please Print): ___________________________________

Signature: ___________________________________________________________