## PACKED MEALS REQUEST FORM

The Head of Food Services \* Rhodes University \* <a href="mailto:foodservices@ru.ac.za">foodservices@ru.ac.za</a> \* 046 622 8897

Complete all the fields and email / hand in to the Head of Food Services for approval

## TWO WORKING DAYS in advance

Food Services is located at 33 South Street

Name and Surname	,	Student Number
Residence		Dining hall to collect from
Cellphone Number		
Reason for packed meal request (please attach proof)		
Meals Required	B	Default □ Halaal □ Veg □
Days required	Monday ☐ Tuesday ☐ Wednesday ☐	☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday ☐
PACKED MEAL OPTIONS		
Monday: 1 x Roast Chicken Pie / 1 x Veg Curry Pie		Tuesday: 2 x Chicken Hotdogs / 2 x Soya Hotdogs
Wednesday: 1 x Footlong Roll with Tuna Mayo OR Egg Mayo OR Cheese and Salad		Thursday: 1 x Chicken Burger / 1 x Soya Burger
Friday: 1 x Roast Chicken Pie / 1 x Spinach and Feta Pie		Saturday: 1 x Chicken Burger / 1 x Soya Burger
Sunday: 1 x Wors Roll OR Burger (Chicken/Beef) / 1 x Footlong Roll with Cheese and Salad		COMMON ITEMS IN ALL PACKED MEALS:  Fruit juice and fruit
NOTE: Late requests are subject to menu changes		
<ol> <li>Rules for ordering packed meals:</li> <li>Packed meals will not be produced for more than two (2) consecutive meals per day – as per food hygiene handling requirements</li> <li>Incomplete forms will not be processed</li> </ol>		
Date of first PM		Date of last PM
Collection time		
Signature of applica	ınt	Date
For Office Use		
Date received Approved by		
Kitchen Notified Meals Coordinator Notified		