

Notification of Lactose Intolerance

Date: _____

To: [School's Name]

Attention: [Principal/Head of School]

[School Address]

Dear [Principal's Name],

I am writing to inform you that my child, [Child's Name], who is in [Grade/Class Name], has been diagnosed with lactose intolerance. This means that [he/she/they] requires a special dietary consideration to avoid any discomfort or health issues that may arise from consuming lactose-containing foods.

We kindly request that you share this information with the cafeteria staff and any relevant teachers to ensure that suitable meal options are available for [Child's Name]. If necessary, we can provide a list of lactose-free food items that [he/she/they] can safely consume.

Thank you for your understanding and support in maintaining my child's health and well-being.

Sincerely,

[Your Name]

[Your Contact Information]

[Your Relationship to the Child]