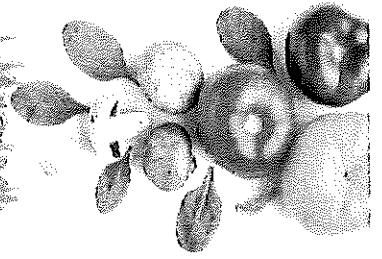


## Moonachie - Robert L. Craig School Elementary Breakfast (K-8) Breakfast, April 2025





**POMPTONIAN**  
FOOD SERVICE

**A Complete Breakfast Includes:**  
Entrée (with Bread/Grain)  
1 Cup Fruit  
Hormone-Free Milk

*Menu Subject to Change*

**FOOD ALLERGIES**  
Allergy-Aware menus are available for students with food allergies. For more information contact your Food Service Director or see our Food Allergy Best Practices at [www.pomptonian.com](http://www.pomptonian.com).

 *At least 80% of All Grains served w/ your meal are Whole Grain Rich*

Your comments are important to us. Please e-mail us at [comments@pomptonian.com](mailto:comments@pomptonian.com)  
"This institution is an equal opportunity provider."

Click on Build A Meal or PRINTABLE MENU buttons to view Available Daily options and Carbohydrate Information.

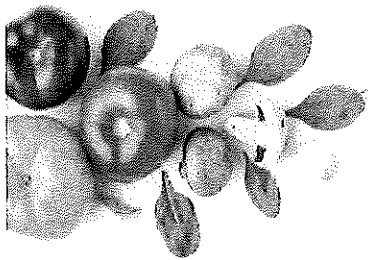
[Build A Meal](#) [PRINTABLE MENU](#)

 **ALSO AVAILABLE ON MOBILE**  
Download the FD MealPlanner App today to view your child's menu from your smart phone!

**JOIN OUR TEAM!**

	Tuesday 01	Wednesday 02	Thursday 03	Friday 04
No Menu Available	Multi Grain Cheerios Cereal Kit ☉ Fresh Pear Fat-Free Chocolate Milk 1% Milk	Whole Grain Cinnatwin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Bagel ☉ Cream Cheese Bagel Orange Fat-Free Chocolate Milk 1% Milk	Cinnamon Waffles Syrup Apple Fat-Free Chocolate Milk 1% Milk
Monday 07	Tuesday 08	Wednesday 09	Thursday 10	Friday 11
Whole Grain Chocolate Chip Muffin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Multi Grain Cheerios Cereal Kit ☉ Fresh Pear Fat-Free Chocolate Milk 1% Milk	Whole Grain Cinnatwin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Bagel ☉ Cream Cheese Bagel Orange Fat-Free Chocolate Milk 1% Milk	Cinnamon Waffles Syrup Apple Fat-Free Chocolate Milk 1% Milk
Monday 14	Tuesday 15	Wednesday 16	Thursday 17	Friday 18
Closed	Closed	Closed	Closed	Closed
Monday 21	Tuesday 22	Wednesday 23	Thursday 24	Friday 25
Whole Grain Chocolate Chip Muffin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Multi Grain Cheerios Cereal Kit ☉ Fresh Pear Fat-Free Chocolate Milk 1% Milk	Whole Grain Cinnatwin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Bagel ☉ Cream Cheese Bagel Orange Fat-Free Chocolate Milk 1% Milk	Cinnamon Waffles Syrup Apple Fat-Free Chocolate Milk 1% Milk
Monday 28	Tuesday 29	Wednesday 30		
Whole Grain Chocolate Chip Muffin ☉ Apple Fat-Free Chocolate Milk 1% Milk	Multi Grain Cheerios Cereal Kit ☉ Fresh Pear Fat-Free Chocolate Milk 1% Milk	Whole Grain Cinnatwin ☉ Apple Fat-Free Chocolate Milk 1% Milk	No Menu Available	No Menu Available

\* Consuming raw or under cooked meat, poultry, seafood, shellfish or eggs may increase your risk of food borne illness, especially if you have certain medical conditions. Menu is subjected to change, notice posted when available. This institution is an equal opportunity provider.





# Moonachie - Robert L. Craig School Elementary Lunch (K-8) Lunch, April 2025



Menu selections may change from those listed on the menu due to supply-chain disruptions and shortages.

Click on Build A Meal or PRINTABLE MENU buttons to view Available Daily options and Carbohydrate Information.


ALSO AVAILABLE ON MOBILE  
Download the FD MealPlanner App today to view your child's menu from your smart phone!



**POMPTONIAN**  
FOOD SERVICE


A Complete Lunch Includes:  
 Entrée (with Protein/Grain)  
 Fruit & Vegetable  
 Hormone-Free Milk  
*Menu Subject to Change*

**FOOD ALLERGIES**  
 Allergy-Aware menus are available for students with food allergies. For more information contact your Food Service Director or see our Food Allergy Best Practices at [www.pomptonian.com](http://www.pomptonian.com).

 At least 80% of All Grains served w/ your meal are Whole Grain Rich


Your comments are important to us.  
 Please e-mail us at [comments@pomptonian.com](mailto:comments@pomptonian.com)  
 "This Institution is an equal opportunity provider."

March





**FRUIT OF THE MONTH**  
LOCALLY GROWN APPLES

VEGETABLE OF THE MONTH



**VEGETABLE OF THE MONTH**  
CRUSHED LOCAL TOMATOES

Click on Build A Meal or PRINTABLE MENU buttons to view Available Daily options and Carbohydrate Information.

ALSO AVAILABLE ON MOBILE  
 Download the FD MealPlanner App today to view your child's menu

	Tuesday 01	Wednesday 02	Thursday 03	Friday 04
No Menu Available	Meatball Parm. Hero 🍷 Grilled Cheese Sandwich 🍷	Popcorn Chicken Smiley Potatoes 🍷 Grilled Cheese Sandwich 🍷	Cinnamon Waffles Cheese Sticks Syrup Grilled Cheese Sandwich 🍷	Pizzeria Pizza Grilled Cheese Sandwich 🍷
Monday 07	Tuesday 08	Wednesday 09	Thursday 10	Friday 11
Breaded Chicken Patty on a Bun Pizza Crunchers 🍷	Cheeseburger on a Bun 🍷 Baked French Fries Pizza Crunchers 🍷	Macaroni & Cheese 🍷 Dinner Roll Pizza Crunchers 🍷	French Toast Sticks 🍷 Syrup Cheese Sticks Pizza Crunchers 🍷	Half Day - No Lunch Service
Monday 14	Tuesday 15	Wednesday 16	Thursday 17	Friday 18
Closed	Closed	Closed	Closed	Closed
Monday 21	Tuesday 22	Wednesday 23	Thursday 24	Friday 25
Grilled Cheese Sandwich 🍷 Tomato Soup Mozzarella Sticks 🍷 Marinara Sauce	Pasta w/ Meatballs 🍷 Dinner Roll Mozzarella Sticks 🍷 Marinara Sauce	General Tso's Chicken Vegetable Fried Rice Mozzarella Sticks 🍷 Marinara Sauce	Maple-Flavored Mini Pancakes 🍷 Syrup Mozzarella Sticks 🍷 Marinara Sauce	Pizzeria Pizza Mozzarella Sticks 🍷 Marinara Sauce
Monday 28	Tuesday 29	Wednesday 30		
Chicken Tenders w/ Baked French Fries Cinnamon Waffles 🍷 Syrup	Pizza Bagel 🍷 Cheese Sticks Cinnamon Waffles 🍷 Syrup	All-Beef Hot Dog on a Bun Waffle Fries 🍷 Cinnamon Waffles 🍷 Syrup	No Menu Available	No Menu Available

\* Consuming raw or under cooked meat, poultry, seafood, shellfish or eggs may increase your risk of food borne illness, especially if you have certain medical conditions. Menu is subjected to change, notice posted when available. This institution is an equal opportunity provider.

# MOONACHIE

Robert L. Craig Elementary School  
ORDER FORM

**APRIL  
2025**

Please indicate your breakfast and lunch choice by including the code from the list below in the appropriate box for the days you would like to order. Return each form to the school by 9:00 a.m. on the due date indicated in an ENVELOPE with the exact money OR check made payable to the "Moonachie Board of Education."

Breakfast Codes: [B1] Daily Breakfast

Lunch Codes:

- [H1] Daily Hot
- [H2] Hot Alternative
- [W] Chicken Caesar Wrap
- [Y] Yogurt Bagel Bag
- [HD] Hot Dog on a Bun
- [D] Italian Hero

Breakfast: 3.00  
Reduced Breakfast: No Charge  
Free Breakfast: No Charge

Lunch: 4.50  
Reduced Lunch: No Charge  
Free Lunch: No Charge

"This institution is an equal opportunity provider."

Tear at this line and return in an ENVELOPE.

DAY	BREAKFAST	LUNCH
MON		
TUE 1		
WED 2		
THU 3		
FRI 4		
TOTAL \$:		

Please check if your student receives

Free Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:

If you plan to participate in the lunch program, you must fill out and return this form.

Please return form by Apr 1

DAY	BREAKFAST	LUNCH
MON 7		
TUE 8		
WED 9		
THU 10		
FRI 11		
TOTAL \$:		

Please check if your student receives

Free Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:

If you plan to participate in the lunch program, you must fill out and return this form.

Please return form by ber Apr 8

DAY	BREAKFAST	LUNCH
MON 14		
TUE 15		
WED 16		
THU 17		
FRI 18		
TOTAL \$:		

Please check if your student receives

Free Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:

If you plan to participate in the lunch program, you must fill out and return this form.

Please return form by Apr 15

DAY	BREAKFAST	LUNCH
MON 21		
TUE 22		
WED 23		
THU 24		
FRI 25		
TOTAL \$:		

Please check if your student receives

Free Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:

If you plan to participate in the lunch program, you must fill out and return this form.

Please return form by Apr 22

DAY	BREAKFAST	LUNCH
MON 28		
TUE 29		
WED 30		
THURS		
FRI		
TOTAL \$:		

Please check if your student receives

Free Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:

If you plan to participate in the lunch program, you must fill out and return this form.

Please return form by Apr 30