

**Exhibit 6.4. Religious Statement for a Child or Children**

**Mississippi Department of Education  
Office of Child Nutrition  
Religious Statement for a Child/Children**

**Part I** (to be completed by School District/School/Organization/Sponsor)  
Date \_\_\_\_\_

Name of School District/School/Organization/Sponsor \_\_\_\_\_

Name of Student/Individual \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

School/Provider/Center Name \_\_\_\_\_

School/Provider/Center Address \_\_\_\_\_

**Part II** (to be completed by a Minister or other Head Authority in Religious Denomination)  
Name of Student/Individual \_\_\_\_\_ Age \_\_\_\_\_

Quote or list the Religious Belief or Church Law or Canon that restricts the student's/individual's diet

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List the food(s) that should be omitted from the child's diet and food(s) that may be substituted based on the answer given above \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Signature of Religious Authority \_\_\_\_\_