



School District: \_\_\_\_\_

I, \_\_\_\_\_, work for Cub Foods and am considered a Tier 2 Worker under the recent Minnesota Department of Education Guidelines governing the provision of care for school-age children in the State.

I am a Worker in the “In-Store Food Personnel” industry, performing or supporting one of the following positions: store clerks, stockers, food preparation personnel, cleaning staff, or deli and produce staff.

I respectfully request that the school provide my school-age child/children with care services so I can perform my job functions.

Please let me know if there is any additional information you need me to provide in order to provide this critical care.

Thank you.

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_