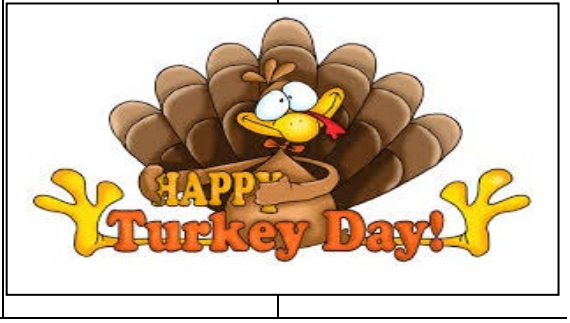
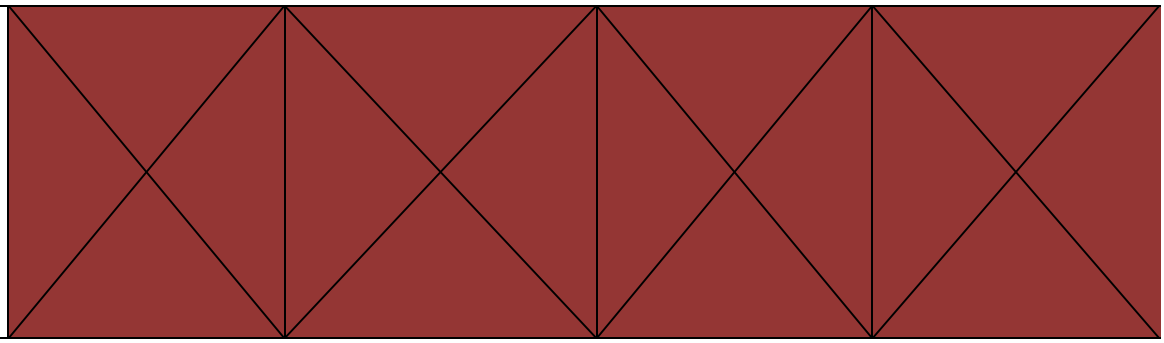
NOVEMBER 2026
BAYONNE ELEMENTARY AND OFFSITE PRE-K
BREAKFAST MENU

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
NOVEMBER				
2 Trix Breakfast Cereal Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	3 **SCHOOL CLOSED** **FALL BREAK NOVEMBER** **3rd to 6th**	4	5	6
9 Apple Jacks Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	10 Honey Cheerios Cereal Breakfast Kit Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	10 VETERAN'S DAY SCHOOLS CLOSED	12 Cocoa Puffs Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	13 Lucky Charms Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple
16 Golden Grahams Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	17 Fruity Cheerios Breakfast Pack Bar Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	18 Trix Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	19 Apple Jacks Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	20 Muffin Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple
23 Lucky Charms Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	24 Froot Loops Cereal Breakfast Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	25 Coco Puffs Breakfast Cereal Pack Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	26 	27

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BREAKFAST MENU

30 Honey Cheerios Cereal Breakfast Kit Milk Selection Graham Crackers or Animal Crackers 100% Pure Fruit Juice Apple	

ELEMENTARY BREAKFAST ORDER FORM

NOVEMBER 14- breakfast serving days
Universal Breakfast = N/C

Menu Subject to Change

All meals include:
Entrée with Fortified Cereal
Whole Grain/Enriched Bread
100% Pure Fruit Juice
And Milk

Please cut on dotted line

NOVEMBER BREAKFAST

Student's Name_____

Teacher's Name_____

Room # _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

To better serve the breakfast needs of the students of the Bayonne School District please let us know if your child will be participating in the breakfast program.

Please check yes or no in the boxes below.

Yes ☐ No ☐