

MEAL PLAN PURCHASE

Semester _____

Date _____

Student Name _____ Student ID _____

Student Major _____

Meal Plan: _____ \$420 - 5 meals per week

_____ \$1050 - 14 meals per week

Student Signature _____

MEAL PLANS ARE A NON-REFUNDABLE PURCHASE!!

FOR OFFICE USE ONLY:

Date Received Form: _____

Form Processed Date: _____

Does student leave for internship in this semester: ___Y ___N

Processed by: _____