



Request To Modify or Terminate Dining Plan Obligation

Please complete the form below and attach any supporting documentation that you feel is necessary for the committee to understand your individual case. Upon receipt of the application the Dining committee will review all information, render a decision, and provide written communication to the applicant the decision within two business weeks of receipt of the completed application. Please return this form and attach the supporting documentation to the Campus Village Front Desk attn: Sales and Marketing Manager

**All dining Modifications/terminations must take place within two weeks of the beginning of each semester. Any requests received after the first two weeks of the academic semester will not be granted.*

Applicant Name	
Applicant Unit	
Applicant Phone number	
Application Date	

Respond to the following questions as they apply to your situation. Please include only the facts and specific details regarding your situation.

1. Describe the nature of your situation.
2. What aspects of the situation warrant the modification or termination of the dining plan?
3. Written documentation from outside professionals (e.g. doctor) who can attest to the nature of your situation.
4. How Campus Village accommodations are insufficient and/or inadequate to resolve your situation.

The Committee will recommend to the Campus Village Management one of the following:

1. Recommend that your request be approved for modification or termination
2. Request additional information and/or clarification
3. Recommend that you be held to your current dining plan with no modifications or terminations.

Campus Village Office Use Only

Date Request Received: _____

Person who received request: _____