

**LYCOMING COLLEGE
MEAL PLAN CHANGE FORM**

Students may change their meal plan once per semester but ONLY during the FIRST TWO WEEKS of the semester. Changes will become effective by the end of the week after the change deadline*. Any meal plan change request made after the change period must meet approval and may not become effective until the following semester.

MEAL PLAN OPTIONS**

- Plan A **CARTE BLANCHE** Unlimited access during the hours of operation at Wertz Dining Hall plus \$50 in Flex dollars/semester. *This plan is required for all first year students for the entire first year.*
- Plan B **THE 14 PLAN** Any 14 meals per week at Wertz Dining Hall plus \$75 in Flex dollars/semester.
- Plan C **THE 12 PLAN** Any 12 meals per week at Wertz Dining Hall plus \$100 in Flex dollars/semester.
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Last Name: _____ First Name: _____

Campus e-mail: _____@lycoming.edu ID #: _____

Current Class Year (circle one): FR SO JR SR

My **CURRENT MEAL PLAN** is: _____ Please change to **NEW MEAL PLAN**: _____

PLEASE COMPLETE THIS FORM AND MAIL (CAMPUS BOX 146) OR DELIVER IT TO THE OFFICE OF RESIDENTIAL LIFE (1ST FLOOR RICH HALL.)

* The deadline for changes will be communicated via e-mail at the beginning of each semester.
** All meal plans are the same price. For information about the cost of the meal plan, please see the Lycoming College Treasurer's webpage.

<u>RES LIFE OFFICE USE</u>	Date received _____
	MPAS _____
	XMPR _____