Student Name	Semester
Student ID#	<u></u>
Meal Plan Form	
COMPLETE THE FOLLOWING AND RETURN TO ENF	ROLLMENT SERVICES - ROOM 101:
Do you currently have a meal plan? Yes N	No If yes, which plan?
I WOULD LIKE TO ADD/CHANGE TO THE FOLLOWIN	NG MEAL PLAN:
17 meals per week - \$1,352.52 for the semi	ester including \$50 Flex (Mandatory for Residential Students)
10 meals per week - \$1,341.30 for the seme	ester including \$100 Flex (Commuter only)
5 meals per week - \$785.40 for the semeste	er including \$100 Flex (Commuter only)
For more information on meal plans, go	to https://www.tompkinscortland.edu/dining-options-meal-plans
	PAYMENT OPTIONS:
	after your anticipated aid has been applied to tuition, fees, and t financial aid used toward your meal plan competes with the be used for book deferrals.
REFUND POLICY - FALL AND SPRING SEMESTERS: Prior to the start of classes 100% During the first week of classes 75% During the second week of classes 50% During the third week of classes 25% After the third week of classes 0%	
	inifies that I have read, understood and agree to abide by the college's meal plar from school, any unused meal plan money will be refunded according to the be issued after the third week of classes.
Student's Signature:	Date: