



Semester	

07/23/18

## Meal Plan Conversion Requirements Fall 2018-Spring 2019

## **IMPORTANT NOTICE**

Regardless of Conversion Meal Plan status, you will be charged for a Meal Plan. If approved, your plan will be changed to the Conversion Plan of your choice.

Last Name	First			Middle In	Middle Initial	
ID#	Email			Phone Nu	mber	
Classification (circle one): TAMS	Freshman	Sophomore	Junior	Senior	Graduate	
Current Meal Plan (circle one):	<b>5-Day:</b> Basic /	Value / Super	<b>7-Day:</b> B	asic / Value	/ Super	

- Student's name and date must be on a letter from an independent (non-relative) licensed medical doctor, registered dietician, or clergy person which outlines dietary restrictions and an acceptable sample menu. The statement should be on letterhead and include the name and contact information of the doctor or clergy person.
- 2. Select desired conversion from the charts below. If approved, meal plan will be converted accordingly.
- 3. Form and required supporting documents must be submitted to Crumley Hall, Room #132 or may be emailed to suzan.cruz@unt.edu. Form and documents must be submitted prior to the 2nd Friday of the semester.
- 4. The campus dietitian will determine whether a special diet can be met in a Residence Dining Hall. The dietician or appropriate spiritual life official may contact the prescriber who provided the student statement.
- 5. Students will be notified whether they have or have not been approved.

## **5-DAY BASIC CONVERSION**

Check One	Plan	Meals	Flex \$	Base	Tax	Total
	160 + 275	160	\$275	\$1,530	\$126.23	\$1,656.23
	120 + 400	120	\$400	\$1,530	\$126.23	\$1,656.23
	80 + 500	80	\$500	\$1,530	\$126.23	\$1,656.23
	8 + 425	8/week	\$425	\$1,530	\$126.23	\$1,656.23
	5-Day Flex	0	\$1,530	\$1,530	\$126.23	\$1,656.23

## **7-DAY BASIC CONVERSION**

Check One	Plan	Meals	Flex \$	Base	Tax	Total
	160 + 375	160	\$3 <i>75</i>	\$1,690	\$139.43	\$1,829.43
	120 + 500	120	\$500	\$1,690	\$139.43	\$1,829.43
	80 + 600	80	\$600	\$1,690	\$139.43	\$1,829.43
	8 + 525	8/week	\$525	\$1,690	\$139.43	\$1,829.43
	7-Day Flex	0	\$1,690	\$1,690	\$139.43	\$1,829.43

By signing below, if approved I give Dining Services approval to convert my meal plan into the Conversion Plan selected above.

STUDENT SIGNATURE	DATE
IF UNDER 18, PARENT/GUARDIAN SIGNATURE	DATE
DINING SERVICES SIGNATURE	TOTAL