LANGSTON UNIVERSITY MEAL PLAN EXEMPTION FORM

For students enrolled and living on campus at Langston University, participation in the campus dining program is required. The fee enables students to purchase meals, food, beverage products and dining services with their personal student photo-ID card. The purpose of the plan is to encourage students to eat on campus to promote community with peers, faculty, staff, alumni, and community partners who endeavor to enhance the learning experience.

Please fill out this form completely with the required documentation attached. Submission of a meal exemption form does NOT guarantee approval for meal exemption.

Name (print): _______________________________  CWID ID #: __________________
Email: _________________________________  Phone: ___________________________
Classification: _____________________________  Semester and Year Enrolled: ________
Submitted Date: ________________

I am requesting exemption from Langston University's required participation dining program. The qualifying factor is:

___A. Medical Exemption: Please attach a typed letter fully describing your dietary circumstances. Include documentation from a licensed medical physician detailing your medical condition. Provide a note from Sodexo stating if they can or can’t meet your dietary needs

___B. Religious Exemption: Please attach explanation of restrictions that cannot be met by Sodexo Dining. Please include a written explanation from your religious counsel/leader.

It is a violation of the Student Code of Conduct to furnish false information to Langston University. A student who furnishes false information to the University will be required to make restitution and may face other judicial sanctions and penalties as appropriate.

Students should submit all required documentation along with this form by 5pm on Friday, December 12, 2014 email, fax, mail or hand delivered to the Office of the Dean of Students in the Student Success Center, Suite 210. The last day to submit exemptions is the add/drop deadline for each semester.

• Email: Dean of Students, Dr. Natasha M. Stephens nmstephens@langston.edu
• Fax: 405-466-3447
• Mailed to: Division of Student Affairs c/o Dean of Students P.O. Box 907 Langston, OK 73050

OFFICE USE ONLY: ☐ Approved Date: __________ ☐ Appeal Upheld Date: __________
Denied Date: __________ ☐ Appeal Overturned Date: __________
☐ Signature ____________________