

# First-Year Meal Plan Exemption Request Form

The University of Alabama  
Auxiliary Services  
Dining Services

NAME \_\_\_\_\_

CWID \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET ADDRESS

HOME PHONE \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP

CELL PHONE \_\_\_\_\_

I am requesting exemption from the University of Alabama First-Year Meal Plan Program. The specific qualifying factor is:

DIETARY CIRCUMSTANCE EXEMPTION. Please attach a letter concisely and fully describing your dietary circumstances. Attach supporting documentation from a licensed Medical Physician.

Students who fail or refuse to comply with the First-Year Dining Program and/or who furnish or submit false information to a University official or office in connection with a request for exemption are subject to disciplinary action in accordance with the Student Code of Conduct and to sanctions which could include imposition of a fine and suspension from the University of Alabama.

Requests for exemption must be received in the University of Alabama Dining Services Office on or before the following dates based upon you intended first term of enrollment: no later than the following schedule:

- July 15 for Fall Semester
- December 1 for Spring Semester

For information regarding requests for exemptions, please contact the University of Alabama Dining Services Office at (205)348-6816, or 1-888-Bama Food (226-2366) or visit the website at [www.bamadining.ua.edu](http://www.bamadining.ua.edu).

STUDENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Please return form to:

University Dining Services  
Attn: Kristina Hopton Jones  
Box 870390  
Tuscaloosa, AL 35487 0390

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## For Office Use Only

Date Exemption Request Received: \_\_\_\_\_

Initial Decision: Approved/Denied Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Date Appeal Received: \_\_\_\_\_

Appeals Committee Decision: Upheld/Reversed Date: \_\_\_\_\_