## FRATERNITY/SORORITY **RESIDENCE LIFE & DINING SERVICES** MEAL PLAN EXCEPTION REQUEST FORM

Name	W#
Residence Hall Address	Birth date
Fraternity/Sorority	Academic Year

I am requesting an exception to the meal plan portion of the 2017-2018 Residence Life & Dining Services Contract. I understand that I am Exempt I Not Exempt from the assessment of 100 percent of the financial obligation for the meal plan remaining under the 2017-2018 Residence Life & Dining Services Contract. I understand and agree that this Residence Life and Dining Services Exception Request, if granted, suspends my obligation to pay meal plan charges under my 2017-2018 Residence Life & Dining Services Contract for this academic year only while I am a member of the fraternity/sorority named above.

I understand that I am requesting to board in a fraternity/sorority chapter facility that is managed by a chapter House Corporation, Chapter Board, or similar entity not under the control of the University of Wyoming and that neither the University of Wyoming nor any of its individual employees are responsible for any action or failure to act by the chapter House Corporation or any of the active chapter members, individually or collectively, or for any failure to comply with any applicable University regulation, Laramie ordinance or Wyoming State and Federal law. Eligible students must be members of fraternity/sorority chapters which have licensed commercial kitchen facilities and student meal plans.

## MEAT DI AN CHANCE

MEAL PLAN CHANC DELETE CURRENT PLAN Unlimited Any 15 Any 12 Any 9 Any 7	GE ADD NEW PLAN Unlimited Any 15 Any 12 Any 9 Any 7 None	TO BE COMPLETED BY RESIDENCE LIFE & DINING SERVICES   FIRST CHANGE:

NOTE: Meal plan change/cancellation requests can be submitted during the two weeks following the end of a chapter's official recruitment period. All meal plan change/cancellation requests made during this time will be made effective the beginning of the third week following the end of the chapter's official recruitment period. Meal plan change/cancellation requests received by Residence Life & Dining Services after this stated two week period will be made effective the following semester.

## DO NOT SIGN UNLESS YOU READ & UNDERSTAND THE TERMS OF THIS REQUEST

Resident's Sign	ature	Date	Signature of Parent/Legal Guardian (if under 18 years	s of age) Date
Chapter Treasur	rer or President	Date	Dean of Students Office/Fraternity & Sorority Life	Date
Approved by:	Residence Life & Dinin	g Services Representative		Date