



Meal Plan Change Form

If you would like to change your meal plan, please complete the section below. This form needs to be filled out and received by our office no later than **5:00 PM on the first Friday of the semester.**

Residential Meal Plan	Cost Per Semester
21 Meals/Week	\$1,800.00
14 Meals/Week with a \$100.00 Flex	\$1,700.00
10 Meals/Week with a \$250.00 Flex	\$1,700.00

Student ID#: _____

Student Name: _____

Please Change My Meal Plan To: (options are 10, 14 or 21 meal plan)

*****To request a meal plan exemption, you must complete a meal plan accommodations request form through the Academic Success Center. Requests must be submitted by the first Friday of the semester.*****

Student Signature: _____ Date: _____

Student Financial Services

Office 530.226.4621

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