Kennesaw State University
Culinary Services, an operating unit of ASaP

SPRING 2015 MEAL PLAN CANCELLATION REQUEST
This form is to be used to request a cancellation of a mandatory or optional meal plan.

<table>
<thead>
<tr>
<th>Name (print):</th>
<th>KSU NetID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Address:</td>
<td>KSU ID #:</td>
</tr>
<tr>
<td></td>
<td>Phone:</td>
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</tbody>
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Housing Status (check one):
- University Place
- University Village
- University Village Suites
- KSU Place
- Univ. Place II

☐ Commuter (off-campus)

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Current Plan: (check one)
- Access7 ($78)
- Access14 ($152)
- Access25 ($300)
- Access40 ($452)
- Access75 ($850)
- Access115 ($1,183)

Reason for Cancellation: (check only one)
- Medical
- Financial
- Special Circumstances (select one):
  - Military Activation
  - Withdrawal from KSU
  - Full-time Internship

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Deadlines:
1. Financial requests and ALL required documentation must be received by 5:00pm on December 8, 2014. No exceptions.
2. Requests due to full-time internships must be submitted by 5:00pm on January 13, 2015. No exceptions.
3. Medical requests and ALL required documentation should be received by 5:00pm on January 13, 2015. Forms will be accepted later in the semester in the case of a newly-developed medical condition. Appropriate documentation must support the request.

Please note:
1. Cancellations of optional plans will incur a $25 Administrative Fee, which will be posted to the student’s Owl Express account. Non-students must submit payment at the time of cancellation. Cancellations granted for medical or financial circumstances, military activation or full-time, off-campus internships will NOT carry the $25 fee.
2. Forms must be turned in or mailed to the address below. Faxed and/or e-mailed forms will NOT be accepted.
3. The completion of this form does not guarantee the cancellation request will be granted. By signing below, you acknowledge that additional information and/or documentation may be required to process your request. If this additional information is not received by the appropriate deadline, the cancellation request will be denied.

Student Signature: ________________ Date: ________________

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For Office Use Only

Approval / Denial Stamp Here

Date Stamp Here

KSU Culinary Services, 540 Parliament Garden Way NW, #4000, Kennesaw, GA 30144