



CALIFORNIA STATE UNIVERSITY, STANISLAUS

HOUSING AND RESIDENTIAL LIFE

Meal Plan Change Form

In submitting this request you are authorizing Housing and Residential Life to change your selected meal plan option. Meal plans can be changed for a period of ten days (10) after check-in.

Name: Last First Student ID#: _____

Email: _____ Cell Phone: (____) _____

Student Signature: _____ Date: _____

Current Meal Plan Option

FRESHMAN

- Option A - 160 block meals with \$1,500 annual flex dollars
Option B - 200 block meals with \$1,400 annual flex dollars
Option C - 240 block meals with \$1,300 annual flex dollars

UPPERCLASS

- Option D - 150 block meals with \$500 annual flex dollars
Option E - 120 block meals with \$850 annual flex dollars
Option F - 100 block meals with \$1,150 annual flex dollars
Option G - \$800 annual flex dollars
Option H - \$1,000 annual flex dollars
Option I - \$1,250 annual flex dollars

New Meal Plan Option

FRESHMAN

- Option A - 160 block meals with \$1,500 annual flex dollars
Option B - 200 block meals with \$1,400 annual flex dollars
Option C - 240 block meals with \$1,300 annual flex dollars

UPPERCLASS

- Option D - 150 block meals with \$500 annual flex dollars
Option E - 120 block meals with \$850 annual flex dollars
Option F - 100 block meals with \$1,150 annual flex dollars
Option G - \$800 annual flex dollars
Option H - \$1,000 annual flex dollars
Option I - \$1,250 annual flex dollars

For Official Use

Updated in StarRez Date: _____
Updated in Cardsmith Date: _____