



MEAL PLAN CHANGE FORM

Student's Name: _____
SU ID number: _____
Building: _____ Room #: _____
Phone number: (_____) _____

Please CHANGE my meal plan to:

- _____ Plan A (\$2612/year)
_____ Plan B (\$2340/year - Standard plan)
_____ Plan C (\$2090/year)
_____ Plan D (\$1260/year - Hotel plan only)
_____ No plan (West Street - apartment only)

Student's Signature _____ Date _____

This form must be received in the Office of Residence Life & Summer Programs no later than September 25, 2009 if you wish to change your meal plan. Please return the form to your building address below:

For 150 Tremont Street: For Miller Hall & Holiday Inn: For 10 West Street & Hyatt Regency:
Residence Life & Summer Programs 150 Tremont Street Boston, MA 02111 Fax: 617.619.4975
Residence Life & Summer Programs 10 Somerset Street Boston, MA 02108 Fax: 617.305.3262
Residence Life & Summer Programs 10 West Street Boston, MA 02111 Fax: 617.223.4404