## Meal Plan Appeal Procedure and Application



Submit this application to the Office of Purchasing, Contract and Auxiliary Services, via Mail Center prior to the deadline(s) listed below. If you have questions, please contact the office at 336-734-2880.

# 2023/2024 Dates

An application for meal plan appeals during the academic year must be submitted according to the following schedule:

#### Fall Semester Appeal

April 1 (Returning Students)
July 1 (New Students)

#### Spring Semester Appeal

October 22 (All Students)



The Board of Trustees of the University of North Carolina School of the Arts approved a policy which requires all C1 (first year) and C2 (second year) students to live on campus and participate in a board meal plan. All first and second year students living in Artist Village must subscribe to the "All-Access" Meal Plan. C3 (third year) and C4 (fourth year) students living in Artist Village must subscribe, at the minimum, to the 175 Meal Plan. Students living in the Centre Stage Apartments, regardless of classification, are not required to subscribe to a meal plan.

Students with documented disabilities may seek accommodations in the academic or living environment on campus (including Dining Services) by supporting a request through documentation, which meets the university's guidelines. All disability-related requests for accommodation and documentation of a disability should be submitted directly to the Office of Learning Resources, UNCSA, 1533 South Main Street, Winston-Salem, NC 27127. For information on the process for documenting a disability, students should contact the Office of Learning Resources via email <a href="mailto:learningresources@uncsa.edu">learningresources@uncsa.edu</a>, by phone at 336-726-6963, or visit their web page at <a href="https://www.uncsa.edu/mysa/current-students/academics/accessibility/">https://www.uncsa.edu/mysa/current-students/academics/accessibility/</a>.

If a student has special dietary needs or restrictions, Campus Dining can accommodate the student to make sure they get the most out of their Meal Plan. For any dietary and/or nutritional concerns, please contact the Aramark Director of Dining Services, Julia Voss at <a href="mailto:vossatedu">vossatedu</a> or 336.631.1288.

The Meal Plan Appeal Committee will review all Meal Plan Appeal Requests related to special dietary needs or restrictions. This committee may be comprised of the Director of Purchasing, Contract and Auxiliary Services, the Aramark Director of Dining Services, the Aramark Dietitian, the Director of Health Services, UNCSA Dietician, UNCSA Medical Provider and the Director of Counseling Services will review Meal Plan Appeals when the need arises.

Once the Meal Plan Appeal Process is complete, students will be notified via their UNCSA Campus Email Address. An official letter will be emailed and placed on file with Dining Services, Student Accounts and Residence Life. All Meal Plan Appeal decisions are final. The student may submit a new request in the subsequent semester if he/she has new grounds for an appeal.

PURCHASING, CONTRACT & AUXILIARY SERVICES Via UNCSA Mail Center

PHONE 336-734-2880 WEB

http://www.uncsa.edu/mysa/dining-services/

### **Meal Plan Appeal Application**



Instructions: Please read and follow the directions on this form carefully. You must indicate the appeal option that most accurately describes your case by checking the box next to the appeal option. The Meal Plan Appeal Committee will carefully deliberate your case using your appeal documents and other University information. The Meal Plan Appeal Committee will determine if your case substantiates elimination or a reduction of your meal plan.

#### Please note that:

- You may not re-appeal; meal plan appeal decisions are final.
- You must be clear in your explanation and submit all necessary documentation to substantiate your appeal. Failure to provide the indicated documentation will result in the denial of your appeal.
- Correspondence regarding your appeal is through your student UNCSA email account.
- Email and phone requests are not accepted in lieu of this form.
- Meal plan appeals that are granted are good for only the academic year granted. Students must re-apply each year for changes to the meal plan.
- Your current meal plan will remain active unless stated otherwise by the Meal Plan Appeal Committee.

Submit this form to: Office of Purchasing, Contract & Auxiliary Services, Via UNCSA Mail Center, 1533 S. Main Street, Winston Salem, NC 27127 before the deadline date. Should you have any questions, please contact the Office of Purchasing, Contract & Auxiliary Services at (336) 734-2880.

Requestor Information (Please Print Clearly)					
Name:	Last Name	First Name	M.I.	#:	
Permanent Addre	ss:				
City:			State:	Zip Code:	
UNCSA Email:			Contact Tele	ephone: ( )	
Current Class Star	nding:  FirstYear (C1)	☐ SecondYear (C	Third Year (C3)	☐ Fourth Year (C4)	
I am appealing to	o: DBe Removed from the M	eal Plan Entirely	☐Reduce to 175 Meal Plan		
This appeal is fo	or the following semester(s):	□Fall Semester	□Spring Semester		
I currently have a	: □ 175-Meal Plan	☐ "All Access" Ui	nlimited Meal Plan		
Please describe be pages if needed.	elow your reasons for requesting c	hange and/or release fror	n the meal plan. Be as thorough as	possible. You may attach additional	

	Appeal	Option #1: Special Dietary				
To a	ppeal und	der this option, you must:				
		eet with the Aramark Director of Dining Services and the Nutritionist to discuss your request. You will be contacted after submitting your plication for a time to meet.				
		t with the student named on this appeal form and discussed his / her dietary needs and the ability of Aramark to accommodate them in the all. I have recorded the highlights of our conversation below:				
Arar	nark Direct	or of Dining Services or Designee Date				
	Annoal	Option #2: Other Extenuating Circumstances				
To a	ippeal und	der this option, you must:				
	(1)	prove without a doubt what the extenuating circumstances are and how they affect your ability to eat in the Dining Hall. You should thoroughly explain the circumstance(s) and provide as much documentation as possible. Please note that these circumstances must be extreme. Appeals for dislike of cafeteria-style food, vegan / vegetarian, etc. will not be approved. Failure to provide enough support documentation for your appeal may result in the denial of your appeal.				
	(2)	meet with the Meal Plan Appeal Committee to discuss your request in person – should your documentation not be supportive enough.				
By s to tl	igning on	the line below, you are certifying that you understand the contents on this form and all the information provided to the University is true and accurate your knowledge. False information provided by student and/or others representing the student may result in a denied appeal.  Student  Date				
FOF	R COMMI	TTEE USE ONLY				
Doe	es request	contain Dietary or Medical Issues?Y /N Sent to Health Services / Dietitian / Counseling?Y /N				
Info	ormation t	from Health Services / Dietitian / Counseling attached for documentation?Y /N				
Dec	ision of N	Meal Plan Appeal Committee?    Approved /Denied     Student Notified     Date:				
Not	es:					
Sigr	Signature of Director of Purchasing, Contract & Auxiliary Services or Designee:					