



Meal Plan Change/Cancellation Form

Address: Winston-Salem State University | 109 Eller Hall | 601 S. Martin Luther King Jr. Dr.

Winston-Salem, NC 27110 Fax: 336-750-2033 Email: auxiliarieservices@wssu.edu

Name: _____

Banner ID: _____

Email Address: _____

Contact Number: _____

Meal Plan Change Request

Current Meal Plan: _____

New Meal Plan Request:

	Meal Plan 1 – Unlimited Meals, \$200 Declining Balance 10 Meal Exchanges, 5 Guest Passes	\$1,885.55
	Meal Plan 2 – 220 Meals, \$325 Declining Balance 5 Guest Passes	\$1,779.68
	Meal Plan 3 – 160 Meals, \$265 Declining Balance	\$1,571.60
	Meal Plan 4 – 100 Meals, \$400 Declining Balance	\$1,281.77
	Meal Plan 5 – 50 Meals, \$400 Declining Balance	\$ 797.84
	Meal Plan 6 – 25 Meals, \$300 Declining Balance	\$ 508.48

X

Student Signature

Date

Meal Plan Cancellation

Reason for Cancellation:

	Housing Cancellation: Attach approval letter
	Withdrawal from University
	Other: Attach supporting documentation

Other explanation: _____

X

Student Signature

Date

For Office Use Only

Account Adjustment Amt: _____

Cancellation/Change Completed

Banner ____ RamCard ____

Banner ____ RamCard ____ RMS ____

Completed by: _____