



## Meal plan Exemption/Accommodation Guidelines and Process

**Please read following page carefully, sign at bottom, and attach the required supporting documentation.**

This policy establishes the guidelines and procedures for students requesting an exemption from the Dakota State University (DSU) Meal Plan program. The Meal Plan Exemption Policy covers meal plans for all students required to purchase a meal plan, typically students of freshman and sophomore standing.

Students living in the residence halls at Dakota State University are required to participate in a university-sponsored meal plan, (see South Dakota Board of Regents policy 3:6.1a).

DSU Dining Services features a variety of choices intended to meet the dietary needs of the University's diverse student body. In certain situations, a student may need to request special meal plan accommodation or in the event DSU Dining Services cannot meet the student's documented dietary or religious dietary observance, an exemption from the meal plan participation may be requested.

Please note that a meal plan exemption will only be granted when the Dining Services program cannot meet the nutritional needs of a student.

Students requesting a meal plan exemption must provide supporting documentation as set forth below. It is the responsibility of the student to obtain any and all required approvals or necessary documentation. In order for the request to be considered all required documentation must be submitted by the deadline.

***Incomplete requests will NOT be considered.***

DEADLINE:

**FALL:** The final deadline for fall semester exemption requests is the Friday following the first day of classes.

**SPRING:** The final deadline for spring semester exemptions requests is the Friday following the first day of classes

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_ (For Students under 18 ONLY)

Please return this completed, signed form to:

Disability Services

Dakota State University

820 N Washington Ave.

Madison SD 57042

Or by email at [DSU-ADA@dsu.edu](mailto:DSU-ADA@dsu.edu)

## Important Related Information:

1. Exemptions for the following reasons will not be considered: dietary preference (e.g. vegan/vegetarian), work/class/practice schedules, or other personal preferences.
2. The health care provider must be a medical doctor MD, DO, NP or ND (correspondence from chiropractors and herbalists will not be accepted).
3. If the request is approved, the meal plan charge will be prorated from the date the decision was communicated. All charges up to that date are valid and will remain on the student's account.
4. **Failure to include required documents with the Meal Plan Exemption/Accommodation Request Form could result in a delay and/or denial of request.**
5. **Requests based on medical condition must complete the Physicians Form.**
6. Requests based on religious observance must complete the Religious Leader Form.
7. Requests received after the deadline(s) will not be considered until the following semester unless a medical condition or a disability arises in the interim.
8. If you submit an exemption request and the board charge has been placed on your account, understand that you are responsible for meeting all payment deadlines. It is recommended that you pay for your meal plan and if your request is approved, your account will be credited on a pro-rata basis determined by the date the exemption is approved.
9. You must reapply for a meal plan exemption each year with current documentation dated within six months of your application.
10. Please keep a copy of the documentation that you submit for your files.
11. Appeals of the decision can be made to the administrator noted below within five business days of receiving the decision. Appeals will only be considered if there is new information to present. The appeal will be reviewed within 15 business days. Appeals should be directed to:  
Amy Crissinger  
Vice President for Student Affairs  
Heston Hall  
Madison, SD 57042  
Appeal materials may also be directed electronically to [amy.crissinger@dsu.edu](mailto:amy.crissinger@dsu.edu).
12. Presentation of falsified information will be considered a violation of the Student Code of Conduct resulting in inappropriate disciplinary action.

## Meal Plan Exemption/Accommodation FAQ

Please review the following FAQ before submitting a request:

**Q: I moved off campus, do I still need a meal plan?**

**A:** A meal plan exemption is not required. You can choose to have a commuter plan (just flex dollars) if you would like to eat on campus, or choose to not have a meal plan at all.

**Q: The options for changing meal plans has closed, can I submit a meal plan exemption to change my meal plan?**

**A:** No, a meal plan exemption cannot be submitted. Students are given 30 – 45 days before the semester starts and approximately two weeks after the semester starts to change their meal plan.

**Q: I am withdrawing, changing schools, or not returning for the spring semester, what do I do about my meal plan?**

**A:** A meal plan exemption is not required – Funds remaining from the fall semester on the student's who do not enroll for spring semester will NOT be refunded.

**Q: I have a dietary condition and want to request a reduced or waived meal plan. How do I do this?**

**A:** Submit the meal plan exemption/accommodation form. You must submit documentation demonstrating the medical necessity for a waiver. This documentation must be provided by a doctor's office, allergy clinic, or registered dietitian.

**Q: My religious beliefs prevent me from finding options to eat with my current meal plan. Do I need to file a request?**

**A:** Yes, a meal plan exemption/accommodation **IS** required. A written statement detailing dietary restriction associated with your sincerely held religious beliefs and a phone number from a religious leader are requested.



GENERAL INFORMATION		
Last Name:	First Name:	Student ID:
Email:	Primary Phone:	
Graduation Year:	Currently Meal Plan:	
Period of Request:	Exemption Type ( <i>check below</i> ):	
Residence Hall:		

AGREEMENT AND AUTHORIZATION			
Completed forms can be submitted via email, fax, or postal service			
Mail: Dakota State University Disability Services 820 N Washington Ave. Madison, SD 57042		FAX: (605) 256-5854 EMAIL: <a href="mailto:DSU-ADA@dsu.edu">DSU-ADA@dsu.edu</a>	
Student's Name: _____			
Student DSU ID#: _____		Phone Number: _____	
Address: _____ (Street Address/PO Box/Residence Hall and Room) (City) (State) (Zip)			
Student Signature: _____		Date: _____	
Parent/Guardian Signature ( <i>if student is under 18</i> ) _____		Date: _____	



**Explanation of Request for Meal Plan Exemptions/Accommodation/Termination**

Describe why you are requesting a meal plan exemption/accommodation. Please provide specific information: