

**MEAL PLAN CANCELLATION REQUEST**

Date: \_\_\_\_\_ Student's Name (Please Print Clearly) \_\_\_\_\_

CSUN ID \_\_\_\_\_ Student's Email Address (to contact regarding this cancellation request) \_\_\_\_\_

**PLEASE READ THE CANCELLATION POLICY BEFORE SUBMITTING THIS FORM.**  
**Please do not submit this form if your request does not fit any of the cancellation options listed below. You must speak to us regarding your request first.**  
**Reason for Cancellation:**

- The semester has not yet begun and I have changed my housing assignment to a kitchen unit. (This option can only be chosen prior to August 24, 2013. This is not an acceptable reason after August 24, 2013.)
- I have decided not to attend CSUN this semester -  **Fall 2013**  **Spring 2014**
- I have officially withdrawn from CSUN for  **medical** or  **other reasons**
- I have cancelled my on-campus housing and/or moved to an off-campus location
  - If your housing cancellation request is denied, your meal plan cancellation request will also be denied. If you appeal your housing cancellation denial and it is approved, you must contact The Meal Plan Office to reactivate your meal plan cancellation request. Housing does not contact us so it is up to the student to let us know that a cancellation on appeal was approved.
  - Until Housing approves your cancellation request, your meal plan will remain in effect and you will be responsible for making payments until such time that your Housing cancellation request is approved.
  - You will continue to be charged for the meal plan until your Housing cancellation request is approved.

**In order for your request to be approved, we must be able to verify your reason for cancelling. Because other departments are involved and need time to process your paperwork, approved meal plan cancellations can take up to 4-6 weeks to process.**

**Approved cancellations are subject to a \$60.00 cancellation fee as well as a charge for the number of weeks enrolled in the Meal Plan Program up to the date of cancellation and not on card usage.**

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

**Administrative Use Only**

Card Number Returned: \_\_\_\_\_

**Approved**      **Denied**      Cancellation Date \_\_\_\_\_

Comments \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date Reviewed \_\_\_\_\_