Commuter Meal Plan Request Form ‘15–’16

Check One:  ☐ Fall 2015   ☐ Spring 2016   ☐ This is a Refill Request

Name________________________________________________ Student ID#:____________

Please Print Clearly

Please Select a Commuter Meal Plan below:

☐ Commuter20 Food Plan - $155
   • Eat when you want, as much as you want, up to 20 visits at Memorial Hall Student Dining Rooms

☐ Commuter30 Food Plan - $215
   • Increases your Commuter Food Plan to 30 visits

☐ Commuter40 Food Plan - $275
   • Increases your Commuter Food Plan to 40 visits and is the best value choice!

COMMUTER PLANS
• All plans expire at the end of the checked semester
• All Commuter Meal Plans must be used at Memorial Hall Student Dining Rooms (not at retail services)
• Commuters can “refill” their plan at any time by using this same form
• Use BlueChip dollars in vending machines and at all other retail services on and off campus
• Add BlueChip dollars to your card by Credit Card or eCheck (no charge) via the Central Pipe Line (go to www.ccsu.edu) OR...
   Cash at one of six (6) Card Value Centers found around campus (Student Center; Devils Den and outside the Bookstore, Elihu Burritt Library, Student Technology Center (Computer Lab), Barrows Hall and Gallaudet Hall).
• If you want to have Breakfast, Lunch or Dinner in an All-You-Can Eat setting, the BlueChip dollars can be used to purchase meals in Memorial Hall every day it is open. (Breakfast - $7.50  Lunch - $8.50  Dinner – $9.50 )
• The Commuter Meal Plan cannot be selected by students living in a CCSU residence hall.

Return to: CCSU-Residence Life
1615 Stanley Street
New Britain, CT 06050
Or fax to: 860-832-1659

Send your check made out to Central Connecticut State University, or, wait until the plan appears on your e-bill and pay electronically.

How did you hear about this plan?  ☐ Dining Services Website  ☐ University Website  ☐ Social Media  ☐ SC Table
☐ From an E-mail I received  ☐ Advising/Orientation  ☐ Word of Mouth  ☐ Other:__________________________

My e-mail address is: _____________________________________________  ☐ Opt Out of future Dining Services e-mail

Signature_______________________________________________________ Date:________________