Date Rcvd.:	Initials:	
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## NORTHWESTERN STATE UNIVERSITY

A Member of the University of Louisiana System

Auxiliary Services Office CAPA Building 140 Central Avenue, Suite 102 Natchitoches, LA 71497

## APPLICATION FOR EXEMPTION FROM CAMPUS DINING SERVICES

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Ins	tru	icti	On	IS:

- 1. Fully complete and return application.
- 2. Attach the **required documentation** to support your request. Application for Exemption should be received before the deadline to change meal plans for the semester/year for which the exemption is requested. The deadline to request an Exemption is seven (7) days after classes begin. Application for Exemption is approved for one (1) calendar year from date of approval unless other period stated specifically. Providing false information is a violation of the NSU Code of Student Conduct and could subject the student/applicant to disciplinary action.

Name	Student ID				
Address					
Street or P.O. Box	City	State	Zip Code		
Student email:					
Date of Birth Classification _			Phone No.		
Period for which exemption is requested	ed:(Specify semester	or year)	Residence: (Check one below)  University Columns University Place Varnado Hall Greek Housing Off Campus		
Check appropriate blanks below:	Exemption 1	Eligibility Criteria			
REASON			REASON		
Military Veteran		Campus Resident with	Campus Resident with meal plan for 6 semesters or more		
Medical Problem		Married, Divorced or dependent minor child			
Financial Hardship		Classified as a Senior			
Age (21 or older)		Other Hardship (explain fully on a separate sheet)			
COMMENTS:					
Applicant's Signature		Date			
Please e-mail completed form to the	Auxiliary Services		es@nsula.edu or fax to 318-357-65		
For Office Use Only:					
Approved through	Semester.	Denied.			
(Note expiration date. Must reapply for			on Committee within 10 business days.		
Auxiliary Services Designee	Date				