



Birmingham-Southern College

Office of Accessibility

Meal Plan Modification Request Form

Birmingham-Southern College requires all students to purchase a meal plan. The College may grant a student a meal plan modification for an appropriate documented disability, chronic medical condition, or religious dietary observances. Meal plan modifications are considered on a case-by-case basis and will only be considered for students who meet the criteria listed below. This request is valid for one academic year, beginning with the Fall term and ending at the conclusion of the Summer term.

Part I: To be Completed by Student

Name: _____

BSC Email Address: _____

Home Address: _____

Phone Number: _____

Student Status: ☐ Incoming Freshman ☐ Incoming Transfer ☐ Current BSC Student
Year ☐ Fresh ☐ Soph ☐ Jr ☐ Sr

Reason for Meal Plan Modification Request

The modification request listed below should be supported by the documentation supplied by a licensed or properly credentialed professional. Please reference the Documentation Guidelines for Academic and Residential Accommodations document provided with this form for Documented Disability or Chronic Medical Condition. Requests submitted due to religious beliefs should be submitted with a written statement on the appropriate organization's letterhead from the student's religious leader stating the reason for the dietary restriction.

I am requesting a meal plan modification due to:

- ☐ Documented Disability
- ☐ Chronic Medical Condition
- ☐ Religious beliefs

Relevant Diagnosis (Disability or Medical Condition outlined in Documentation) or Religious Belief:

Explain how the meal plan modification requested is necessary based on current evaluation and documentation:

If granted the meal plan modification, describe how you will eat throughout the academic year:

This document and the information contained herein is private and shall not be shared with any party except to the extent necessary to carry out appropriate and reasonable accommodations. By signing below, I authorize the Office of Accessibility to discuss my request with the appropriate BSC personnel in order to provide accommodations.

Student Signature: _____

Date: _____

- Does the information submitted clearly demonstrate the student is eligible for a modification due to a disability, as defined under applicable law or a religiously held belief?
- What is the relationship between the disability or belief and the modification requested?
- Are the modifications requested necessary in order for the student to live in a residential environment?
- Can Birmingham-Southern College accommodate the student's needs with the available facilities?