



MILLIKIN UNIVERSITY®

STUDENT FINANCIAL SERVICES

2015-2016

Board (Meal) Plan Agreement

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Please select one option from one of the categories below. If you wish to "Build Your Own Plan," you may choose one meal-only option *and* one flex-only option to create a customized plan.

- Changing or declining plans must be completed within the first 10 days of each term.
- Additional flex dollars may be added to an existing flex plan in increments of \$25.00. Additional flex dollars must be prepaid.
- Flex dollars roll from Fall to Spring, but **unused meals do *not* roll.**
- All unused meals and flex dollars are forfeited at May commencement.

	<u>First Semester</u>	<u>Second Semester</u>	<u>Annual Cost</u>
<u>Meal-Only Plans:</u>			
175 Meals Per Semester (avg. of 11 per week)	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$2,190
120 Meals Per Semester (avg. of 7 per week)	<input type="checkbox"/> \$850	<input type="checkbox"/> \$850	<input type="checkbox"/> \$1,700
<u>Meal Plans Including Flex:</u>			
100 Meals and \$100.00 Flex Per Semester (avg. of 6 per week)	<input type="checkbox"/> \$820	<input type="checkbox"/> \$820	<input type="checkbox"/> \$1,640
50 Meals and \$100.00 Flex Per Semester (avg. of 3 per week)	<input type="checkbox"/> \$475	<input type="checkbox"/> \$475	<input type="checkbox"/> \$950
25 Meals and \$100.00 Flex Per Semester (avg. of 2 per week)	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$590
<u>Flex-Only Plans:</u>			
\$300.00 Flex Dollars Per Semester	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$600
\$200.00 Flex Dollars Per Semester	<input type="checkbox"/> \$200	<input type="checkbox"/> \$200	<input type="checkbox"/> \$400
\$100.00 Flex Dollars Per Semester	<input type="checkbox"/> \$100	<input type="checkbox"/> \$100	<input type="checkbox"/> \$200

Student Name: _____ **ID Number:** _____
(please print)

I have read and understand this Board (Meal) Plan Agreement.

Signature: _____ **Date:** _____

I wish to decline my existing plan.

Signature: _____ **Date:** _____