Residents living on campus are required to participate in one of several University-sponsored meal plans. Illinois Tech Culinary and Hospitality Services features a variety of choices intended to meet the dietary needs of the University’s diverse student body. In certain situations, a religiously observant student may need to request special meal plan accommodations. In the event Illinois Tech Culinary and Hospitality Services cannot meet the student’s documented dietary restrictions, an exemption from the meal plan participation may be requested. The process for obtaining an accommodation or exemption based on the student’s sincerely held religious beliefs is coordinated through the Office of Student Affairs and involves the following:

1. The student must prepare and submit to the Office of Student Affairs a written summary of the faith-based dietary needs that identifies the student’s religious affiliation and details the faith-based dietary restrictions.

2. After submitting the summary, the student will be contacted to schedule a meeting with the General Manager for Illinois Tech Culinary and Hospitality Services. The purpose of the meeting is to develop an action plan to address the student’s religious-based dietary needs and to discuss a plan to reasonably accommodate his or her needs. The General Manager may include the Executive Chef in the discussion. In reviewing the student’s request, the University reserves the right to consult pertinent religion-based dietary guidelines from qualified and authoritative sources.

3. After completion of steps 1 and 2, the student will be notified of the outcome by the Office of Student Affairs.

SECTION I: TO BE COMPLETED BY THE STUDENT

Student Name: ___________________________________________  IIT ID: __________________________

IIT Email ___________________________________________@hawk.iit.edu  Cell Phone: ________________________________

Please describe your religious affiliation and specify any religiously-based dietary restrictions you have (attach a separate sheet if necessary):

Please describe your plan of action for obtaining meals if the meal plan exemption is approved:

By submitting this form, i) you attest that the information contained herein is true and accurate, and reflects your current faith-based practice, and ii) any and all information submitted by you in connection with your request for an accommodation or exemption may be reviewed by authorized University representatives.

Signature __________________________________________________________________________

Date ___________________________________________
SECTION II: TO BE COMPLETED BY STUDENT’S RELIGIOUS COUNSELOR (e.g., priest, rabbi, minister, imam, etc.) OR RELIGIOUS SCHOOL ADMINISTRATOR.

Please review the information the student has completed above; your signature provides validation of the student’s needs based on religious observance. Attach to this form your statement affirming the student’s regular practice (which must be on synagogue/congregational/parish letterhead) and return to the student to be included with his or her request for a meal plan accommodation or exemption.

Name: ______________________________________________

Position: ____________________________________________

Relationship to Student:

Last time you interacted with this student:

Phone: ________________________________ Email: ________________________________

Address: __________________________________________

Signature: __________________________________________ Date: __________________________

Please note:

• This request is valid for the academic year for which it was signed.

• Submitting this request form will begin a review process that could end in the following ways: 1) the request for a meal plan exemption will be approved; 2) the request for a meal plan exemption will be denied; 3) a meal plan may be created for you by the Illinois Tech Culinary and Hospitality Services team that will satisfy the restrictions documented with reference to your request form.

• It is a violation of IIT’s Code of Conduct to submit false information on this form. Students who do so may be subject to IIT’s disciplinary process.

COMPLETED FORMS SHOULD BE SUBMITTED TO THE OFFICE OF STUDENT AFFAIRS:

Illinois Institute of Technology Office of
Student Affairs
3201S. State St., MTCC 209
Chicago, IL 60616

Email: dos@iit.edu

Fax: 312-567-8917