



*Office of Residence Life*

## Authorization for Sick Tray Meal-to-Go

If a student is unable to get to the dining facilities due to illness or injury, a proxy person may use this form to obtain a Sick Tray Meal-to-Go for the sick or injured student. The proxy is NOT entitled to a meal at the dining hall unless s/he has her/his own meal plan.

Date: \_\_\_\_\_

Sick or Injured Student's Name (Print): \_\_\_\_\_

Student ID #: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Proxy Name (Print): \_\_\_\_\_

Proxy Signature: \_\_\_\_\_

Residence Life or other University staff witness (required):

Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Department: \_\_\_\_\_

\* This form must be surrendered to the cashier at the dining facility.

\*\* Proxy ID must also be shown and verified by witness and cashier.