



Commuter Meal Authorization Form Academic Year 2024-2025

Print Name: _____ RSU ID#: _____

By signing below, I authorize Rogers State University to charge my account for the Commuter Meal Plan outlined below. I understand any unused portion will forfeit as of the last Spring semester of the current academic year. **IMPORTANT:** Commuter Plans must have payment arrangements made at time of selection, are non-refundable and cannot be changed once applied to my account.

This form may be mailed if it is accompanied by payment for the meal plan selected below. If a student has additional financial aid over/above the obligation on their account, this form must be brought to the Bursar's Office in person for processing before the Commuter Meal Plan is added. Any form not meeting these conditions will not have a meal plan added to the account.

Commuter Meal Plan Options:

- 50 Block Meals with \$125 Flex Dollars - \$605.00
- 25 Block Meals with \$150 Flex Dollars - \$422.00
- Apply Financial Aid to cover Meal Plan costs

For questions regarding Commuter Meal Plans, please contact the Bursar's Office at 918-343-7558 or bursaroffice@rsu.edu. Also, visit us online at www.rsu.edu/idcard. Forms with accompanying payment can be mailed to Rogers State University c/o Bursar's Office, 1701 W. Will Rogers Blvd., Claremore, OK 74017.

Signature: _____ Date: _____

Office Use Only

Applied to Account By: _____ Date: _____