



Illness and Injury Meal

Mailstop 211

P.O Box 549110

Waltham, MA 02454



1. Health Services can provide you with a signed "Illness and Injury meal" form.
2. Any friend roommate, or CA can take the signed form to Sherman Dining Hall and give it to the on-duty manager.
3. A Dining Service Manager will assist in putting together the items you have requested so that a friend or CA can bring the meal back to you.

NAME OF STUDENT: _____

PHONE NUMBER: _____

METHOD OF PAYMENT: CASH MEAL PLAN

POINTS CARD Number:

TYPE OF MEAL: KOSHER NON KOSHER:

MEAL: BREAKFAST: LUNCH: DINNER:

Soup: Vegetarian Non Vegetarian
 Crackers Bread

Entrée of the Day: Vegetarian Non Vegetarian

Dessert: Yes No

Fresh Fruit: Yes No

Beverage: Soda Milk
 Juice Bottled Water
 Coffee Hot Tea

Bakery: Muffin Bagel Cereal
 Oatmeal Toast

Authorized Health Center or Administrator Signature: _____

Please Print Name: _____

Health Services Phone Number: _____

Expires: _____

Notes: _____

