

UNIVERSITY of
NORTHERN COLORADO



Dining Services
Meal Take-Out Authorization

Date: _____ UNC Bear Number: _____

Student Name: _____

Local Address: _____ Phone _____

Reason/Conflict: _____

Page 1 is for students who have a conflict between class schedule and dining room hours. You must provide a copy of your class schedule along with this form. Please turn this in to the Dining Services Office in Tobey-Kendel 120 or fax to 351-2754.

GOURMET TO GO TAKE-OUT REQUEST (at least 24 hours notice required):

Gourmet To Go Location: Holmes Tobey-Kendel

Circle day(s) of week take-out request is needed: Mon Tues Wed Thurs Fri

Pick up time: _____ a.m. / p.m. Date(s) Requested: _____

Length of request: days weeks month full semester

BREAKFAST

Choice of Two:

- Cereal + Milk
- Oatmeal Cup (limit 1)
- Yogurt
- Hard Boiled Eggs (2)
- Bagel & Cream Cheese
- Muffin

Choice of Fruit/Fruit Cup:

_____ (Preference)

Choice of Two:

- Water (limit one each)
- Juice (limit one each)
- Milk

LUNCH OR **DINNER**

Choice of One:

- Sandwich _____ (Preference) Lettuce/Tomato?
- Macaroni & Cheese Tuna Kit
- Pepperoni Hot Pocket Ham & Cheese Hot Pocket
- Soup _____ (Beef, Chicken or Vegetarian)

Choice of Three:

- Fruit _____ Carrots/Celery
- Chips _____ String Cheese
- Cookies _____ Fruit Roll-Up
- Rice Krispie Treat Pudding
- Apple Sauce Cup Granola Bar

Choice of One:

- Milk Water Soda _____ (Preference)

Please note that menu options may change due to product availability.

Student Signature

Date