

Student Accommodation Dietary Requirements

If you have any food allergies or particular dietary requirements, please complete the below form. This information is required for the safety of the person concerned and will be treated in the strictest of confidence. Please be as detailed as possible.

PERSONAL DETA	AIL3				
NAME			UNIT/ROOM N	UNIT/ROOM NUMBER	
CONTACT NUMBER					
COLLEGE/APARTMEN	NT (PLEASE TICK	ONE)			
O BASSER COLLEGE		O FIG TREE HALL	O GOLDSTEIN COLLEGE		
O PHILIP BAXTER COLLEGE		O UNSW HALL			
FOOD ALLERGIE	S				
WHICH FOODS ARE Y	OU ALLERGIC TO	?			
ADE VOIL ALL EDGIC	TO THE EOOD IN A	COOKED OD DAW STATE O	D DOTUS (DI EASE TICK)		
ARE YOU ALLERGIC TO THE FOOD IN A COOKED OR RAW STATE, OR BOTH? (PLEASE TICK) O COOKED O RAW O BOTH					
OGGRED	O 10 W	0 20111			
DIETARY REQUIR	REMENTS				
			sible to accommodate individua nent will be applied at every mea		
		K WHERE APPROPRIATE)			
Vegetarian	○ YES	○ NO			
Vegan	O YES	○ NO			
Pescatarian	O YES	○ NO			
OTHER / COMM	ENTS?				
ACKNOWLEDGE	MENT				
NAME			SIGNATURE	DATE	