

Maine Maritime Academy

Dietary Accommodation Requests

Procedures and Documentation Guidelines

Introduction

Sodexo's Dining Services at Maine Maritime Academy has many options to serve dietary needs. Standard food selections include those for allergy-accommodated, vegetarian, vegan, and gluten free diets (among others). We encourage students to speak to Sodexo's management team personnel and to refer to the Sodexo website to identify nutritional content and allergen information posted in daily menus:

mainemaritime.sodexomyway.com/dining-near-me

(Click the Main Dining Room menu button, select a breakfast, lunch or dinner menu, scroll down menu to see the allergen code, and view the nutritional information of each menu item by clicking on its calorie content.)

Students not needing formal dietary accommodations as described below can schedule informal consultations with a Sodexo management team member, at any time during the semester, about food preparation, standard ingredients, and the offerings of the various dining stations. For questions regarding available options, ingredients, or cooking methods, it is important to ask a member of the management staff.

Sodexo contact information

For questions regarding meal plan options: Sodexo Dining Services
(207) 326-2657
dining.services@mma.edu

For other questions: Phil Cotoni Carly VanCamp
General Manager OR Administrative Assistant
(207) 326-2463 (207) 326-2657

Requesting Dietary Accommodations

Students with dietary needs or food allergies and that seek formal meal plan accommodations must contact the Accessibility Services office and use the form below. Accessibility Services will work with the student and with Dining Services and Residential Life (if needed) personnel to develop an individualized and effective dietary accommodation plan. The food choices in the plan will be nutritionally comparable to the food choices of other students to the extent reasonably possible.

To qualify for dietary accommodation, a student must supply documentation to the Accessibility Services director (address below). Acceptable documentation may be from a medical doctor or from an appropriately licensed dietitian, nutritionist, or allergist. The documentation should describe:

- The condition requiring the accommodation
- The current effects and severity of the condition
- A list of food types the student is to avoid with corresponding severity of reaction
- A list of acceptable food options

The director will review the documentation and place it on file in the Accessibility Services office. The director may share portions of the material with Dining Services personnel to assist in determining an acceptable accommodation. Accessibility Services will schedule an initial meeting with the student, the director, and Dining Services personnel to discuss specific needs and establish a plan; a follow-up meeting may be necessary. Due to the severity of some allergic reactions, informing appropriate staff of dietary restrictions may also be necessary.

Send or bring the documentation and request form (next page) to Joceline Boucher, Accessibility Services Director (207 326-2489; joceline.boucher@mma.edu) at:

Accessibility Services
Maine Maritime Academy
1 Pleasant Street
Castine, ME 04420

Request for Dietary Accommodation

To request a dietary accommodation, please answer this form as completely as possible and include documentation from a medical physician or other approved professional. Submit your request and supporting documentation to Accessibility Services at Maine Maritime Academy (address below). All documentation will reside in the Accessibility Services office.

The Accessibility Services director will review the request and contact you to schedule a meeting. Sodexo's Dining Services staff may be present at the meeting and will know of your dietary restriction but not of the diagnosis. A follow-up meeting may be necessary to discuss specific needs and establish a plan. To allow adequate time to implement the accommodations, please submit requests as soon as possible.

Name: _____ Date: _____

Home Address: _____

Phone Number: _____ E-mail: _____

**Food Allergies and Medical Conditions
(please check all that apply)**

Food Allergy is:

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Gluten/Wheat | <input type="checkbox"/> Eggs |
| <input type="checkbox"/> Dairy | <input type="checkbox"/> Soy |
| <input type="checkbox"/> Peanuts | <input type="checkbox"/> Fish |
| <input type="checkbox"/> Shellfish | <input type="checkbox"/> Tree nuts |
| <input type="checkbox"/> Other (please specify): _____ | |
| _____ | |
| _____ | |
| _____ | |

Gluten Intolerance

Other medical conditions requiring dietary accommodations (please specify): _____








Do you carry a prescribed epi pen? Yes No

Please attach supporting documents and return form to:

Accessibility Services
Maine Maritime Academy
1 Pleasant Street
Castine, ME 04420
accessibility@mma.edu
(207) 326-2489

Please indicate the nature of your allergy or food intolerance by circling any of the symptoms illustrated below.

SEVERE SYMPTOMS

 LUNG Short of breath, wheezing, repetitive cough	 HEART Pale, blue, faint, weak pulse, dizzy	 THROAT Tight, hoarse, trouble breathing/swallowing	 MOUTH Significant swelling of the tongue and/or lips
 SKIN Many hives over body, widespread redness	 GUT Repetitive vomiting, severe diarrhea	 OTHER Feeling something bad is about to happen, anxiety, confusion	OR A COMBINATION of symptoms from different body areas.

MILD SYMPTOMS

 NOSE Itchy/runny nose, sneezing	 MOUTH Itchy mouth	 SKIN A few hives, mild itch	 GUT Mild nausea/discomfort
---	--	--	---