

Trinity College  
Office of Spiritual  
and Religious Life

**Dining Exemption for Religious Reasons - Religious Leader**

The following form must be completed by a religious leader who is knowledgeable about the dietary needs of your religious tradition. They must be a non-relative. If you have any questions about this form, please email [marcus.halley@trincoll.edu](mailto:marcus.halley@trincoll.edu). Once completed, the student should upload this form at the same time that they complete their request online.

1. Student's Name: \_\_\_\_\_

2. Does this student practice a religion that has specific dietary requirements (circle one)

YES

NO

3. What is the name of the religious tradition? \_\_\_\_\_

4. Please describe, in as much detail as possible, the religious based dietary needs, practice, or requirements that the student must follow:

Religious Leader's Name (Please Print): \_\_\_\_\_

Sign Here: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

*Thank you for your time and effort in completing this form!*

**Trinity College Chapel**  
300 Summit Street  
Hartford, Connecticut 06106