Food and Nutrition Services, 136 Almon C. Hill Dr, Cumming, GA 30040

STUDENT MEAL ACCOUNT BALANCE OPTIONS

We must have a request **in writing** to process movement of funds on your student's school meal account.

Part A:

Student name: School:
Student ID#:
Parent Name/Signature: _____

___I wish to Donate my student's account balance to help others have a school meal (complete Part A)

___I wish to Transfer the funds to another student account (complete Part A & B)

___I request a Refund Check (complete Part A & C)

TRANSFER / REFUND

Part B: <u>To transfer funds</u> to another account for **ACTIVE** students, please go into My School Bucks and make transfer. If there are issues, please feel free to use this form.

Please Note: Auto-Pay must be disabled in My School Bucks prior to requesting a transfer/refund.

For students that have graduated or leaving system (**INACTIVE**) please fill out information below:
Student name, school, and student ID# to transfer **FROM**:
Student name, school, and student ID# to transfer **TO**:
Amount to be transferred, IF different than balance:

Part C: <u>To request a refund,</u> you should include the following information:

Refund check should be made Payable **TO**:
Postal Mailing address for refund check:

Mail or email this form to our office *to the attention of FNS Bookkeeper*

Mailing address: Forsyth Co. Schools - Food & Nutrition Services
136 Almon C. Hill Drive
Cumming, GA 30040 Attn:
FNS Bookkeeper

Email: FNS-Bookkeeping@forsyth.k12.ga.us

*No cash refunds are available at school cafeterias or Central Office

This institution is an equal opportunity provider, employer, and lender.