

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

## STUDENT MEAL ACCOUNT BALANCE OPTIONS

We must have a requ	lest in writing to process movement of funds on your student's school meal account.
Part A: Student name: Student ID#: Parent Name/Signati	School: ure:
I wish to Donate	my student's account balance to help others have a school meal (complete Part A)
I wish to Transfer	r the funds to another student account (complete Part A & B)
I request a Refun	d Check (complete Part A & C)
	TRANSFER / REFUND
	r funds to another account for ACTIVE students, please go into My School Bucks For students that have graduated or leaving system(INACTIVE) please feel out
Student name, school	ol, and student ID# to transfer FROM: ol, and student ID# to transfer TO: erred, IF different than balance:
Part C: To request the month.	a refund you should include the following information. Checks are cut at the end of
Refund check should Postal Mailing addre	d be made Payable TO: ess for refund check:
	nis form to our office to the attention of Missy Anderson. If you have any questions, Anderson (770) 888-3473 ext. 310193.
Mailing address:	Forsyth Co. Schools - Food & Nutrition Services 136 Almon C. Hill Drive Cumming, GA 30040 Attn: Missy Anderson

Email: manderson@forsyth.k12.ga.us

\*No cash refunds are available at school cafeterias or Central office (revised 07/2024)

"This institution is an equal opportunity provider."