

Student Food Service Account Balance Request/Transfer Form

Please complete the following fields and return to Jennifer Wilinsky, Food Services Director at JWilinsky@Fleetwoodasd.org or Fleetwood Area School District, 801 N. Richmond Street, Fleetwood, PA 19522.

Refunds will be issued in the form of a check and mailed to the address below. Forms must be completed by parent/guardian. Refunds may take from 4-6 weeks to process.

Complete the following section that corresponds to the action you would like to take.

1. Donate the remaining balance of your student's account to students in need

Please list the names of the students and corresponding ID numbers of any student in your household who you would like to donate the balance of their account:

Donating Student Name: _____ ID Number _____

2. Transfer funds from one student in your household to another student in the household

FROM: Name _____ ID Number _____ AMT _____

TO: Name _____ ID Number _____ AMT _____

3. Refund of existing balance

Parent/Guardian's Name: _____

Student's Name: _____

Student's Account # _____

Amount: _____

Mailing Address: _____