



Pioneering the Next Generation

# School District of Sevastopol

4550 Highway 57 • Sturgeon Bay, WI 54235 • 920-743-6282 • Fax: 920-743-4009  
www.sevastopol.k12.wi.us

We must have a request **in writing or this form** to process, refund, or pay-it-forward of funds on school meal accounts.

**The following information is needed to process request.**

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Please select a section that applies to your request.

       **Refund Requested**

\*Check payable to Guardian: \_\_\_\_\_

\*Mailing address: \_\_\_\_\_

\_\_\_\_\_

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

Reason for Refund \_\_\_\_\_

       **Pay it forward** to donate the remaining funds to the Angel Fund and help cover other students that may need assistance.

Thank you for your donation.

Parent/Guardian Signature: \_\_\_\_\_

Please return this form to Casey Andrews, Food Services Director. If you have any questions please feel free to contact Casey at 920-743-6282 x1117.

Mailing address: School District of Sevastopol  
4550 Highway 57  
Sturgeon Bay, WI 54235

Fax to: 920-743-4009 or Email to: [candrews@sevastopol.k12.wi.us](mailto:candrews@sevastopol.k12.wi.us)

**\*Cash refunds are not available at the school cafeteria.**

This institution is an equal opportunity provider.

For office use only	Request received:	Approved:	Payment sent:	Amount sent or transferred
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