

BOARD OF EDUCATION
517 HAMILTON STREET
HARRISON, NEW JERSEY 07029

PROCEDURES FOR LUNCH BALANCES WITH THE DISTRICT'S FOOD SERVICE PROGRAM

If your child has a positive lunch balance:

1. If your student is a graduating HHS senior, or is going to another school in September, a parent representative will reach out to you via email and/or call to arrange for a refund;
2. For those other students who have a balance of plus \$50.00 or more, a parent representative will reach out to you via email and/or call to see if you would like a refund or roll-over the balance to September;
3. For those students who have a positive balance under \$50.00, your balance will be automatically rolled over to September unless you complete and return a refund form;

If your child has a negative lunch balance:

1. Please contact Gaby Salme, 973-483-2285 x2047.

Attached is the Refund of Meal Monies Form

Any questions, please contact: Gaby Salme, 973-483-2285 x2047

REFUND OF MEAL MONIES AT THE HARRISON PUBLIC SCHOOLS

Date: _____

Name of Parent/Guardian: _____

Current Address of Parent/Guardian: _____

Home Telephone #: _____

Cell Telephone #: _____

Work Telephone #: _____

If moved, former address: _____

Name of Student	School	Grade	Balance on Account	As of Date

I hereby certify that I, _____, am the only person entitled to a return of monies that are on account for the above-named student(s) in the total amount of \$_____. I understand that these monies were deposited for the use of meals for the above-named student(s) and the reimbursement check will be issued to me only. No cash will be given. I understand the refund request may take up to thirty (30) days to process. **I will not place any further monies on account for the above-named student(s) through the balance of the school year as no further refunds will be given for the above-named student(s).**

The reasons I am requesting the refund are:

Date: _____

_____(signature)
Print name below

FOR OFFICE USE ONLY:

Printed Name of Person Verifying Amount Due	Signature	Office	Date	Reasons Confirmed Yes or No?	Total Amount Due
1.		School			
2.		HBOE			