Pasadena Independent School District Request for a Refund

Campus Name:			

PISD Policy states that refunds that total \$10.00 and under will be given in cash. Refunds in the amount of \$10.01 and over will be issued in the form of a District Check mailed to the address furnished below.

STEP ONE: Filled in by Student,	/Parent	
Student Name:		Student ID #:
Reason for Refund Request:		
Amount of Refund \$	Email Address	s:
Home/Cell Number:		Work Number:
STEP TWO: Filled in by Student	t/Parent	
Make Check Payable To:		
NAME:		
ADDRESS:		APT#
CITY:	STATE:	ZIP CODE :
Signature of Student/Parent: (Parent Required if student is under		Date:
	SOR COMPLETE * Initiate in Cash (
	he Cash System/Lawson for boo	
If for Textbook, Title:		Accession #:
* Cash System Receipt Number	er:	
* Teacher/Sponsor's Signature	e:	*Date:
		eper/Secretary to process ***
STEP FOUR: BOOKKEEPER/SE	CRETARY COMPLETE AND PRO	DCESS
*(Choose One) Student will recei		O District Check Credit to Credit Card *
General Ledger		*(Attach Revtrak receipt to form)
		Activity Code:
Bookkeeper/ Secretary Signature:		Date :
Notes:		