



Millennium Community School

Helping children reach for the stars!

Refund Request Form

1. All cash refund will be return in the form of a Millennium check, that will be process within 3-4 business weeks
2. Complete this form to the best of your ability to expedite requests.
3. Your submission acknowledges understanding of these conditions.

Student Full Name: _____

Parent Full Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

Refund Amount: _____

Explanation for Request: _____

For Office Use Only

Date: _____

Receipt No# _____

Refund Request Amount _____

PO Request No# _____