



William S. Hart Union High School District

Please complete the following information to transfer funds from your student's My School Bucks Account to another student My School Bucks Account. The student receiving the funds must be currently enrolled with the District.

From Student Account:

Name: _____

Student ID: _____

School: _____

Grade/Graduating Year: _____

To Student Account:

Name: _____

Student ID: _____

School: _____

Grade/Graduating Year: _____

Your Relation to Students: _____

Phone Number: _____

Email: _____

Submit completed forms to Natalia Blumke: nblumke@hartdistrict.org

DO NOT COMPLETE DISTRICT USE ONLY

Request Received: _____ *Transfer Completed By:* _____

Account Balance: _____ *Date:* _____