

Student Scholarships, Grants and Outreach Refund Worksheet

This form is to be completed by postsecondary institutions returning previously paid funds to Student Scholarships, Grants and Outreach (SSGO). Institutions must return funds if students do not meet the enrollment standard, do not make satisfactory academic progress, if a student withdraws, or otherwise does not meet program requirements. Form and check should be sent to the refund specific P.O. Box listed at the bottom of this form.

NOTE: Institutions should never send current year refunds for programs in MiSSG. Any differences in aggregate amounts awarded and paid are designed to net out naturally over the course of the four quarterly payments.

Programs in MiSSG:

Children of Veterans Tuition Grant, Dual Enrollment, Fostering Futures Scholarship, Futures for Frontliners Scholarship, Michigan Competitive Scholarship, Michigan GEAR UP Scholarship, Michigan Reconnect Scholarship, Michigan Tuition Grant, Police Officer's and Fire Fighter's Survivor Tuition Grant and Tuition Incentive Program.

USE ONE WORKSHEET PER PROGRAM per Academic Year

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Children of Veterans Tuition Grant
(Prior Year Only) | <input type="checkbox"/> Dual Enrollment
(Prior Year Only) | <input type="checkbox"/> Fostering Futures Scholarship
(Prior Year Only) | <input type="checkbox"/> Michigan Competitive Scholarship
(Prior Year Only) |
| <input type="checkbox"/> Michigan GEAR UP Scholarship
(Prior Year Only) | <input type="checkbox"/> Michigan Tuition Grant
(Prior Year Only) | <input type="checkbox"/> Police Officer's and Fire Fighter's
Survivor Tuition Grant
(Prior Year Only) | <input type="checkbox"/> Tuition Incentive Program
(Prior Year Only) |
| <input type="checkbox"/> Futures for Frontliners Scholarship
(Prior Year Only) | <input type="checkbox"/> Michigan Reconnect Scholarship
(Prior Year Only) | | |

College Name		Total Refund Due
Semester/Term and Date Semester/Term Began	Number of Students	Check Number

Student Name	SSN (last 4 digits only)	Original Award Amount	Original Credits Billed	Correct Tuition Amount	Correct Fees Amount	Correct Credits	Amount of Refund	Reason for Refund	
Use page 2 for additional entries.							Total		

Authorized Signature		Title		Date	
Phone Number		Fax Number		E-mail Address	

Make checks payable to: State of Michigan
Send form and check to: Michigan Department of Treasury, SSGO Refunds, P.O. Box 30782, Lansing, MI 48909

Phone: 1-888-447-2687, Fax: 517-241-5835, E-mail: mistudentaid@michigan.gov

For office use only: Processed by: _____ Date Received: _____

Student Name	SSN (last 4 digits only)	Original Award Amount	Original Credits Billed	Correct Tuition Amount	Correct Fees Amount	Correct Credits	Amount of Refund	Reason for Refund
Total								