Reset Form

Michigan Department of Treasury
2779 (Rev. 02-26)

Contract Number(s)

Notice to Transfer to Another University or College

Issued under Public Act 316 of 1986. Filing is voluntary.

The Beneficiary (student) must submit this form to MET to **transfer** to a different university or college.

If you have been using your MET educational benefits at a Michigan public institution, you may use this form only to transfer between Michigan public universities and colleges. To have MET funds paid to a Michigan independent (private) or out-of-state institution, you must complete the "Notice to Terminate a MET Educational Benefits Contract" (Form 2773) and supply the required documentation.

Beneficiary Name (Student)	Last four of Beneficiary's Social Security Number
Street Address	Telephone
City, State, ZIP Code	Email Address
Name of University/College Currently Attending	City and State of University/College Transferring To
Semester Benefits to Transfer (Select One): ☐ Fall ☐ Winter ☐ Spring ☐ Summer Year:	Is this a Dual-Enrollment? ☐ Yes ☐ No If No, list the semester(s) and year that the transfer applies to _____
Comments	

Signature of Beneficiary (Student)	Date

MAIL COMPLETED FORM TO:
Michigan Education Trust
PO Box 30198
Lansing MI 48909

Fax: 517-763-0124
Email: TreasMET@Michigan.gov