



Withdraw from Program Request

Awardee Type:

- Retention
 Recruitment

EMAIL COMPLETED/SIGNED FORM TO:

smart@nps.edu

Type of Request:

- PRIOR to Funding of Award
 AFTER Funding of Award

Policy Statement – PRIOR to Funding of Award: A Participant who has accepted a SMART Scholarship award, but subsequently decides to withdraw from the Program prior to the funding of his/her award may do so with no obligation to repay funds or provide post-graduation service. An award is funded when the Program has made payments on behalf of the Participant for any or all of the following: cash award, tuition, health insurance reimbursement, and/or book allowance.

Policy Statement – AFTER Funding of Award: A Participant who has accepted a SMART Scholarship award but subsequently decides to withdraw from the Program after the award has been funded in whole or in part must promptly repay any and all funds expended under the Program by the U.S. Government on behalf of the Participant. An award is funded when the Program has made payments or partial payments on behalf of the Participant for any or all of the following: cash award, tuition, educational fees, health insurance reimbursement, and/or book allowance.

Policy Statement – During Phase 2: Participants who have completed a portion of their Service Commitment and decide to withdraw from the Program, will receive a reduction of the required reimbursement commensurate with the amount of time served.

SECTION 1 – Participant Information

Name (LAST, First, MI):	Cohort Year:
Phone:	Email:
Sponsoring Service:	Sponsoring Facility:
Facility POC Name:	Facility POC Email:

SECTION 2 – Scholarship Award Information

Current Academic Institution:	City/State
Degree Level Funded by SMART: <input type="checkbox"/> BS <input type="checkbox"/> BS/MS <input type="checkbox"/> MS <input type="checkbox"/> MS/PhD <input type="checkbox"/> PhD	Field of Study:
Degree Completion Date *:	Degree Conferral Date **:
Has your award been funded? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please contact the SMART Program Office directly at smart@nps.edu .

Please state why you wish to withdraw from the Program:

Notes: * - Degree completion date: Date on which an individual completes all requirements to obtain a degree. This date occurs prior to the degree conferral date and is not set forth on official transcripts.
** - Degree conferral date: Date on which a degree is bestowed upon an individual. This date is set forth on the official transcript reflecting the degree earned.

SECTION 3 – Statement of Understanding

By signing this form I understand that I am requesting to withdraw from the SMART Scholarship Program and that I will not receive tuition, educational fees, cash award, health insurance reimbursement, book allowance, or any other benefit under the Program. I also understand that if I withdraw during Phase 1, I am responsible for the prompt reimbursement of any and all funds that were expended under the program by the U.S. Government on my behalf. If I withdraw during Phase 2, I am responsible for the prompt reimbursement of funds expended by the U.S. Government on my behalf commensurate with the amount of time served. I further understand that if I fail to promptly repay funds expended under the program by the U.S. Government on my behalf, this debt will be referred to the U.S. Treasury Department for collection and may reflect negatively on my credit report and/or negatively impact my eligibility to receive loans from commercial lenders.

Please Check:

- I accept these terms. I do not accept these terms.

Participant Signature	Date:
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-----DO NOT WRITE BELOW THIS DOTTED LINE / SMART PROGRAM OFFICE USE ONLY-----

SECTION 4 – SMART Program Office Review

<input type="checkbox"/> Documentation is complete for SMART Program Manager.		
Cohort Administrator Name:	Cohort Administrator Signature:	Date:
<input type="checkbox"/> Received and Acknowledged		
SMART Program Manager Signature:	Date:	