

Information Required when Referring Student Overpayments due to Withdrawal to Borrower Services - Collections

Student Information

Name (Last, First, MI): _____ Address: _____

Telephone Number: _____

Social Security Number: _____ Date of Birth: _____

If the student received an Academic Competitiveness or National Smart Grant, enter the appropriate identifier.

ACG Award ID: _____ National Smart Grant Award ID: _____

Parent/Spouse Information

Name (Last, First, MI): _____ Address: _____

Telephone Number: _____

School Information

If your Pell Reporting ID is different than your Pell Attended ID, please report both. Otherwise, just report the Attended ID.

Reporting School's Pell ID Number: _____ Attending School's Pell ID Number: _____

Name of Contact: _____ Telephone Number: _____

Disbursements and Repayments

	Pell Grant	Academic Competitiveness Grant	National Smart Grant	FSEOG
Award year in which overpayment was disbursed:	_____	_____	_____	_____
Total grant disbursed:	_____	_____	_____	_____
Dates of disbursement: (must match NSLDS overpayment record)	_____	_____	_____	_____
Adjusted amount for student to return: (From Step 10 of the Return calculation)	_____	_____	_____	_____
Total grant repaid by student to school, if any:	_____	_____	_____	_____
Date of last payment to school, if any:	_____	_____	_____	_____
Total being referred for collection:	_____	_____	_____	_____*

If using individual or aggregate matching, report federal share only. Otherwise report total FSEOG. *