Bookstore Opt -Out Form – Early Refund

Student Information

Name:	ID/DOB:
Phone:	Email:

_____ I wish to opt- out of North Central Michigan College's standard bookstore process and receive a portion of my Federal Pell Grant to purchase books.

_____ I understand the refund will be processe d according to the following policies:

x The opt-out form must be returned by the add/drop date for the semester.

x If you are receiving a scholarship, the Bookstore will [illegible]

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