

2024-25 LEAVE OF ABSENCE FROM SCHOLARSHIP PROGRAM

This informational form is for students already approved for Michigan Reconnect or Futures for Frontliners, and have completed at least one semester, who will be requesting a leave of absence from the applicable scholarship program at Schoolcraft College. More information on these programs and your eligibility can be found by logging into the state's [student portal](https://www.michigan.gov/studentportal) on [Michigan.gov/mistudentaid](https://www.michigan.gov/mistudentaid). Please complete all questions below and submit them back to the Office of Financial Aid.

Student Name

Student ID #

1. Is this your first Leave of Absence request? Yes No

(Note: Documentation is required)

2. Which program have you been approved for? Michigan Reconnect Futures for Frontliners

3. When is your anticipated reentry date? Semester: _____ Year: _____

4. Reason for requesting the leave:

- HEALTH: Student experiencing lengthy illness, injury, or hospitalization.
 - CAREGIVING: Student is caregiver for a loved on experiencing a lengthy illness, injury, or hospitalization
 - MANDATORY WORK SCHEDULE CHANGE: Student's employer implements a mandatory change in student's work schedule.
 - BEREAVEMENT: Student experiencing death of a loved one.
 - MILITARY DEPLOYMENT: Student is deployed for military duty.
 - WAITLIST FOR SCHOOLCRAFT PROGRAM:
 - Program name: _____
 - PERSONAL HARDSHIP: Student experienced a life event outside of their control, not listed above.
- MUST COMPLETE PAGE 2.

We must have your FAFSA on file for the current academic year.

AUTHORIZATION

By signing this form, I agree it is my responsibility to notify the Office of Financial Aid if the information above changes.

Student Signature

Date

****SIGNATURES MUST BE HANDWRITTEN****

Please flip for page 2

PERSONAL HARDSHIP: If you indicated Personal Hardship on the first page of this form, please complete all questions below and submit to the office of Financial Aid with supporting documentation attached.

1. What was your hardship?

2. When did your hardship begin and end?

3. What steps have you taken to ensure this hardship will no longer impact your education?
