

Fellowship/Scholarship Payback Agreement

Department of Media and Information
College of Communication Arts & Sciences
Michigan State University
(updated fall 2021)

Student Name: _____ Student APID: A _____
(EMPL ID)

Date of Request: _____ Date of Travel: _____ Email: _____

Name of conference/festival: _____

Location of conference/festival: _____

In accepting this award, I agree to reimburse Michigan State University for all stipends, fees, and/or tuition paid if I withdraw from the university during the period of the award, or otherwise fail to fulfill the conditions and expectations for which the fellowship was awarded. **This includes the inability to undertake travel for which a travel fellowship was awarded.**

Signature of Student

Date

