STUDENT FINANCIAL AID CONSORTIUM AGREEMENT:

- Consortium agreements are a binding agreement between schools which enables a student to receive federal aid from The University of Alabama while being enrolled as a visiting student at another school. The university from which a student intends to earn a degree is called the ‘home institution’, while the other school is considered to be the ‘host institution’.
- Students should complete a consortium agreement even if they have at least six enrollment hours at UA during the term of the agreement, because they may be entitled to receive additional financial aid based on the combined credits at both schools. If the student withdraws or drops below half time they may lose eligibility for some or all of the awarded financial aid.
- This consortium agreement may be **denied** if the classes can be taken at UA, you have used a consortium for multiple semesters or you are not meeting satisfactory academic progress standards.

There are four sections to the agreement, all of which must be completed in full before the agreement can be processed. Students and Advisors please review the information and instructions below for assistance in completing this form.

Student Checklist:
- Complete Section I. of the agreement.
- Meet with your academic advisor or department representative to have Section II. completed.
- Make sure you are meeting Satisfactory Academic Progress requirements and you are enrolled in a degree seeking program and meet all other financial aid eligibility requirements according to UA policy.
- Contact your host schools Financial Aid Office to have Section III. completed and follow up later to make sure the completed form has been forwarded to The University of Alabama’s Financial Aid Office.
- It is recommended that you coordinate the completion of the agreement between all parties. The completed agreement must be submitted to The University of Alabama’s Financial Aid Office for your award to be reviewed. **Partial or incomplete agreements are not accepted and will not be processed.**
- Check with your host school to determine that they accept consortium agreements. If a school refuses, that decision is respected and cannot be overruled.
- Check with your host school to determine when its enrollment fees must be paid. Even if payment is due prior to financial aid being disbursed at UA, you may be obligated to pay your host school in a timely manner.

UA Academic Advisors:
- The purpose of a consortium agreement is to allow The University of Alabama to consider the enrollment hours and costs to attend another school for the purposes of receiving federal aid while making progress towards completing an academic degree.
- Academic advisors or departmental representatives must certify that the courses listed in the agreement are transferable and applicable toward the student’s degree requirements.
THE UNIVERSITY OF ALABAMA

Student Financial Aid

Section I. To be completed by the student.

By submitting this form you confirm that you are a degree seeking student who intends to receive federal aid at The University of Alabama while enrolled in transferable courses at a host institution.

Last Name: __________________________ First Name: __________________________ M.I: __________________________

Telephone Number: __________________________ Campus Wide Identification Number (CWID): __________________________

Number provided by the Office of Academic Records. This is not your SSN.

Student Statement of Purpose: Why must these hours be taken at another institution this semester? You **must** complete this item.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Section II. To be completed by the student’s UA academic advisor.

The student listed above intends to enroll in the following courses at __________________________ (host school). These courses are the academic equivalent to The University of Alabama courses listed. (Please attach additional courses on a separate sheet, if necessary.)

Course: __________________________ UA Equivalent: __________________________

Course: __________________________ UA Equivalent: __________________________

Course: __________________________ UA Equivalent: __________________________

Course: __________________________ UA Equivalent: __________________________

Course: __________________________ UA Equivalent: __________________________

My signature below confirms that the courses to be taken at __________________________ (host school) will be accepted as partial fulfillment of the requirements for the above named student’s degree at The University of Alabama.

_________________________________________ __________________________

Academic Advisor Date

_________________________________________ __________________________

Academic Advisor Printed Name Phone Number Email Address
Student Name: ____________________________  CWID: ____________________________

Section III. To be completed by the host (visiting) institution.

Name of Host Institution: ____________________________  Semester: Fall____Spring____Summer____

Dates of Enrollment: from __________ to __________  Total Enrolled Credit Hours: __________

Educational Costs for Dates of Enrollment:  Send Payment To:

Tuition and Fees: $___________  Office Name: ____________________________
Room and Board: $___________  Address: ____________________________
Books and Supplies: $___________  __________
Personal: $___________  __________
Travel: $___________  __________
Total: $___________  Comments: ____________________________

Amount Due: $___________  ____________________________

Under this agreement the host institution agrees to notify The University of Alabama if the student withdraws or drops below the required enrollment and will not process any federal or state aid during the period of enrollment noted above.

________________________________________  ____________________________
Signature  Name(printed)

__________________________  ____________________________
Title  Date

__________________________
Telephone Number

__________________________
Fax Number

__________________________
Email Address

Section IV. To be completed by The University of Alabama’s Financial Aid Office.

The University of Alabama will process all financial aid for the student in accordance with its policies and procedures to be disbursed to the host institution at the above listed address. The student will receive any unused portions as a refund. This consortium agreement may be denied if the classes can be taken at UA, you have used a consortium for multiple semesters or you are not meeting satisfactory academic progress standards.

COA Adjustment: ____________________________  Estimated Award Amount: ____________________________

________________________________________  ____________________________
Signature and Title  Date

PLEASE MAIL OR FAX THIS FORM TO:
The University of Alabama’s Financial Aid Office
106 Student Services Center, Box 870162 Tuscaloosa, AL 35487-0162
Telephone: (205) 348-6756 • Fax: (205) 348-2989