

Consortium Agreement Check Sheet

- _____ I am completely admitted.
- _____ I have applied for Financial Aid.
- _____ I am registered at another institution (Host Institution).
- _____ I have completely filled out the top of the consortium agreement.
(List all courses to be taken. Obtain your Department Chair's signature to ensure your classes are valid toward your degree.)
- _____ I have had the HOST Financial Aid Office fill out their portion of the consortium agreement.
- _____ I have signed the consortium agreement.

The final step is to mail the consortium agreement to the following address:

Distribution of financial aid at the start of each semester for consortiums varies on several factors:

- Preferred method is for you to pay at the Host school and send a paid receipt to our Financial Aid Office. Business Services will then release the check directly to you.
- If you must use financial aid to pay the Host school, you must coordinate payment between Business Services and the Host School.



Application for Consortium/Contractual Agreement

I _____, SS# _____ - _____ - _____, Phone # _____ request that a consortium/contractual agreement be made on my behalf for _____ semester, 20____, between:

1. Host Institution

Home Institution
 The University of Montana - Western
 710 South Atlantic
 Dillon, Montana 59725

AND

Classes to be taken at the Host Institution:

<u>Class #</u>	<u>Class Name</u>	<u>Credits</u>	<u>Class Sub</u>	Home Credits:
_____	_____	_____	_____	If enrolling at Host and also at HOME enter total HOME credits: _____
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	

I certify the above name student has been approved for course work at the Host School and that the credits will be accepted toward the student's degree at _____.

Dean or Chair's Signature

Printed Name/Title

Date

Telephone

2. Completed by Financial Aid at Host Institution

Total Credits _____ Period of Enrollment
 From _____
 To _____

Semester or Quarter _____

Tuition & Fees _____

Books & Supplies _____

Room & Board _____

Other Expenses _____

Host Institution's Signature Printed Name & Title

Date Telephone

3. Home Institution Section

Total Credits _____

 Semester

Tuition & Fees _____

Books & Supplies _____

Room & Board _____

Other Expenses _____

Total _____

Home Institution Signature

Date

- The institutions named above agree to enter into an agreement as allowed by Part 668.19, Student Assist. Gen. Provisions.
- The Host institution agrees NOT to provide financial assistance to the student for the term as listed.
- In case the student withdraws from school, the Host institution agrees to promptly notify the Home institution in writing so that adjustment or cancellation of aid can be made where appropriate.
- The Host institution agrees to disburse all aid provided by the Home institution upon verification of enrollment if requested to do so.

I certify that I understand and agree to comply with all terms and conditions stated and that the information provided on this form is true and complete to the best of my knowledge.

Student's Signature

Date

Student Certification

1. Consortium will NOT be offered until a minimum of one semester, with satisfactory academic progress, has been attained.
2. I understand that either Host or Home Institution may decline to participate in this consortium agreement.
3. I understand that I must be fully accepted in a certificate, undergraduate or graduate degree program and that courses I am taking at the Host Institution must be transferable and apply toward my degree.
4. I understand that I must submit proof of my registration at the Host school before any Title IV Financial Aid will be disbursed to me.
5. I understand that it is my responsibility to arrange for, or pay for costs at the Host Institution, until my financial aid can be released.
6. Aid can be disbursed only after I have an official award and verification of enrollment, earlier than the first day of classes based upon the Home Institution's calendar.
7. I understand that disbursement of my financial aid may be released directly to me if I have proven that I have paid with personal funds at the Host school, otherwise the Home Institution may choose to send my aid directly to the Host school for payment.
8. I understand that it is my responsibility to make arrangements to transfer credits earned from the Host Institution to the Home Institution at the end of the term of the Host Institution. A transcript from the Host is required whether or not I complete or pass the course(s).
9. I understand that I will be required to repay financial aid for courses at the Host Institution if credits are not transferred to the Home Institution. I understand that financial aid for future terms will not be released until transfer credits have been received and satisfactory progress has been met.
10. I understand repayment of financial aid, including loans, disbursed by the Home Institution may be required if I (1) drop during the refund period, (2) withdraw—officially or unofficially, or (3) credits are not transferred to the Home Institution.
11. By my signature, I authorize the Host Institution listed to release enrollment, financial and academic information to the Home Institution's Financial Aid Office.