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## **Boston University** Financial Assistance

## **Financial Aid Consortium Agreement**

This financial aid consortium agreement is required by the federal government for either postsecondary institution listed below to pay or process Federal (Direct Loan, PLUS Loan) or state award for a student who is enrolled as a <u>non degree</u> student at the **Host institution** but is a matriculated graduate school <u>degree</u> candidate at **Boston University**.

Section I. To be completed by the Student						
Student's name		Social Security Number				
Permanent Address						
Local Telephone Number		E-mail Address				
*Throughout this document Boston University is referred to as the "Home" Institution. As a Boston University enters into a consortium agreement with the "Host" Institution named herein.  Home Institution: Boston University Host Institution:						
The student is completing this form for the following semester (check one)  Fall  Spring  Summer  Summ						
Course Courses	s to be taken at the Host Ins Course Title	stitution du	Credit	ester Start and End	]	
Number	Oourse Tille		Hours	dates		
					]	
					-	
					1	
					]	
<b>Section II</b> of this form must be completed by an official at the Office of the Academic Dean at your Boston University school/college, and must confirm that the credits to be earned at the Host Institution will be accepted toward the completion of your Boston University degree.						
Section III must be	completed by an official of the	e Financial	Aid Office at th	ne Host Institution.		
can process any fed	d back) must be completed deral or state financial aid for v Boston University taking class	which you n	nay, as a stude	ent matriculated into a		
Student's Signature Date					_	

Student's Name	Social Security Number						
Section II. To be completed by the Office of Academic Dean at Boston University							
<ol> <li>Name of Boston University College/School:</li> <li>Is the student currently enrolled in a degree program: Yes  No</li> <li>Is the student in academic good standing with his/her College: Yes  No</li> <li>Has the student received approval from his/her College for the courses he/she proposes to take (listed in section I) at that the Host Institution: Yes  No</li> <li>Will the credits be accepted toward completion of the Boston University degree: Yes  No</li> </ol>							
Signature	Name	Title	Date				
Section III. To be completed by the Host Institution's Financial Aid Office							
Cost of Attendance	):	Dates of Enrollment	:				
Tuition Fees Housing & Food	\$ \$ \$	Financial aid awarded by Host school:					
Books/Supplies Transportation	\$ \$	Number of credits:					
Personal MISC	\$ \$	Comments:					
Total	\$						
<ol> <li>Certification</li> <li>Boston University agrees to provide payment(s) to this student, if eligible, under Title IV Programs as appropriate for the term(s) specified.</li> <li>The Host School agrees not to provide Title IV Program payments to this student during the term(s) specified and further agrees to notify Boston University if the student withdraws from classes with the Host Institution.</li> <li>It is agreed to by both Boston University and the Host Institution that all financial aid will be sent to the Host Institution in the form of a check made co-payable to the student and the Host Institution.</li> </ol>							
Host Institution Na	me						
Contact Person _		Telephone #					
Address							
Signature	Name	Title	Date				
Section IV. To be completed by Boston University Financial Assistance							
Signature	Name	Title	Date				