

Financial Aid Office Missoula, MT 59812-2232 Phone: (406) 243-5373 Fax: (406) 243-4930 finaid@umontana.edu

## **CONSORTIUM AGREEMENT FORM - University of Montana**

A consortium agreement enables you, the student, to receive financial aid while concurrently enrolled for courses at your degree granting institution (home institution), the University of Montana (UM), and another institution (host institution). This allows your eligibility for financial assistance to be based on the total credits being attempted at both institutions for the semester or term.

## Consortium Steps:

Student Name

Student Address

Student Telephone number

Name of Home Institution (degree granting)

- 1. Complete and sign the Student Information Section on this page. Consortium agreements must be submitted as soon as possible, but no later than two weeks before the end of the term.
- 2. List the courses being taken at Host institution and your UM Academic Advisor must sign the form stating your transfer credit hours will count toward your certificate or degree at UM (see section below).
- 3. Send or take this form to the Financial Aid Office at the Host Institution for completion and signature.

City

4. Have the Host Institution return this form to the financial aid office at UM.

## TO BE COMPLETED BY THE STUDENT

Student ID

State

Student Email address

Home: Date Semester Begins

Zip

Home: Date Semester Ends

University of Montana (UM)							
Student's Major/Program							
Student Certification – I acknowledge that:							
1.	Either the Host Institution or UM may decline to participate in this consortium agreement.						
2.							
	transferable and apply toward my degree at the UM.						
3.	· · · · · · · · · · · · · · · · · · ·						
4.	I will receive financial aid from UM and all financial aid records for this period will be maintained at the financial aid office at UM.						
5.							
6.							
	a) Drop a course during a refund period,						
	b) Withdraw (officially or unofficially), or						
	c) The host institution credits are not transferred to UM.						
	I understand that if any of these occur, I will not be eligible to receive financial aid for future periods of enrollment at UM until						
	repayment has been made.						
7.	All credits taken at the host institution must be transferred to UM, and will be used to determine my Satisfactory Academic						
	Progress as a financial aid recipient. Additionally, I understand that financial aid for future terms will not be released until						
	transfer credits have been received and satisfactory progress has been met. Please review the UM Satisfactory Academic						
8.	Progress policies at <a href="https://www.umt.edu/finaid/maintaining-eligibility/default.php">https://www.umt.edu/finaid/maintaining-eligibility/default.php</a> It is my responsibility to arrange for payment of costs at the host institution, including tuition, fees, and books, until funds can						
0.	be disbursed by UM. Disbursement of financial aid funds will follow the UM schedule. You must follow the regular payment						
	procedures at both institutions to insure that your bills are paid by the required deadline dates.						
9.	I authorize the host institution to release enrollment, financial, and academic information to University of Montana Financial						
	Aid Office.						
By cianina k	pelow I, the student, certify that I have read and understand the procedures and requirements of the consortium agreement. I						
, , ,	mply with these procedures, and understand that noncompliance will result in a loss of financial aid.						
Student Sig	nature: Date:						
****** Continue to 2 <sup>nd</sup> page ******							
Continue to 2 page							

## TO BE COMPLETED BY ACADEMIC ADVISOR AT UM

Course Number	Anticipated Courses at <b>Host Institution</b>				Credit Hours		
Course Number	(List courses titles below)				Credit Hours		
UM Academic Advisor Certification:  I certify the above-named student has been approved for course work at the Host School (listed above) and that the credits will be accepted							
toward the student's degree/certificate at							
UM Academic Advisor Signature & Date	Printed Name/T	inted Name/Title			Email		
TO BE COMPLETED BY THE HOST INSTITUTION'S FINANCIAL AID OFFICE							
Name of <b>Host</b> Institution	Host Instit	Host Institution's Address			Fax Number		
Semester and Year of Attendance Term (circle one): Autumn / Spring / Sum Year: 20		Host: Date Semester Begins			Host: Date Semester Ends		
Total of any Non-Federal Title IV aid from	Host:	:: Total Credits at Host:					
Host School Cost of Attendance:	hool Certification:						
Tuition & Fees \$			The Host and UM agree to enter into an agreement as allowed by Part 668.19, Student Assistance Gen. Provisions.				
Books & Supplies \$		<ol> <li>The Host institution agrees NOT to provide federal TITLE IV financial assistance to the student for the term listed.</li> </ol>					
Room & Board \$		In case the student withdraws from school, the Host institution agrees to promptly notify the University of Montana in writing.					
Other Expenses \$		All aid will be disbursed to the student and the student is responsible for payment of all charges at the Host Institution.					
Total \$		responsible for payment of all charges at the most institution.					
Host Financial Aid Signature & Date	Print Name/Title Email A		il Address				
TO BE COMPLETED BY UM'S FINANCIAL AID OFFICE							
Total Term Credits (UM + Host School Cre	edits)		Banner Processing Checklist:				
UM Adjusted Cost of Attendance:			RRAAREQ		☐ SFAREGS		
Tuition 9 Eggs C			RHACOMM		☐ ROAENRL ☐ Y ☐ C ☐ N		
Tuition & Fees \$			RPAAWRD		☐ ROAHOLD ☐ o ☐ c ☐ cd		
Books & Supplies \$			ROASTAT		RBAPBUD (check):		
Room & Board \$			☐ SGASTDN (c		☐ UG Dep.☐ UG Independent		
Misc./Personal \$			☐ MTN ☐	]MC Jwile	☐ UG Indep. w/kids☐ Graduate☐ LAW		
Other Expenses \$			☐ TARA ☐ D		_		

Return this completed form to the UM Financial Aid Office at:

UM Financial Aid Signature

Date

Total

 $\infty$  EMAIL: finaid@umontana.edu |  $\infty$  FAX: 406-243-4930

 $\infty$  MAIL: UM Financial Aid Office, 32 Campus Dr., Missoula, MT 59812