



Consortium Agreement Instructions and Student Responsibilities

The purpose of this agreement is to establish procedures for the administration of Title IV Federal financial assistance for students concurrently attending Eastern Kentucky University and another accredited college or university. **Please carefully read all instructions, student responsibilities and important information.**

Instructions

- Complete the Student section of the consortium agreement form (a separate form must be completed for each visiting college/university you are attending.)
- Submit form to your EKU academic advisor for completion of the advisor section. **You are responsible for getting this section completed even if you are not physically attending EKU.**
- Submit form to the financial aid office of the school you are visiting for completion of the visiting school section.
- Once all sections of the form are completed, return it to EKU's Financial Aid office. **Your complete form must be received by EKU's Financial Aid office by the last day of the "drop/add" enrollment period at EKU for the current term or it cannot be processed.**

Student Responsibilities and Important Information

- **You must inform the EKU Financial Aid office if you drop a class, fail to start a class, or change your classes at the visiting school. If you change classes, the new class(es) must be approved by your EKU Advisor and you must submit a new consortium form for the new class(es). If you drop, withdraw, or fail a class you may be required to repay the financial aid you have received.**
- You must request an academic transcript of your grades earned at the visiting school to be sent to EKU once the term is over. A hold will be placed on your EKU financial aid record until the transcript is received and recorded at EKU. This hold will prevent you from receiving any future financial assistance at EKU. **You are responsible for informing the EKU Financial Aid office once the transcript has been received and your grades have been recorded by the EKU Registrar's Office.**
- You must successfully complete your classes at the visiting school or you may be denied future financial assistance (refer to EKU SAP policy: www.finaid.eku.edu/policies) and may be denied aid for future consortium agreements.
- You cannot receive financial assistance at both schools. You must pay for your classes at the visiting school with your refund from the aid you receive at EKU. EKU bears no responsibility regarding the payment of your tuition charges/fees at the visiting school.
- You must be a degree seeking student at EKU.
- You must be enrolled at EKU for at least 3 credit hours while attending your visiting school, but a consortium agreement will not be processed if you are enrolled full-time at EKU as you are already eligible for the maximum aid possible, based on your enrollment at EKU.
- Students are limited to two consortium agreements while at EKU. (Exception: If a student is in his/her last semester, and a required class is not offered at EKU, we will consider processing a third consortium.)
- EKU merit scholarship awards are for full-time enrollment at EKU only.
- A consortium agreement will not be processed for independent study or audited classes.
- You must meet all eligibility requirements for Title IV Federal Assistance as set by the U.S. Department of Education.

EKU CONSORTIUM AGREEMENT

Between

and

Eastern Kentucky University

(Visiting School)

STUDENT SECTION (please print in ink)

**** This COMPLETED form must be submitted to the ECU Financial Aid Office by the last day of ECU's drop/add period for the appropriate term or it will not be processed. ****

Name: _____ ECU ID# _____

Major/Degree Seeking _____ Phone _____

Term: _____ (Fall/Spring/Summer) Year: _____

Courses you plan to take at the Visiting School:

Name of Course & Course # (ex. BIO 100)	Credit Hours	EKU Equivalent Course Name & Course #

By signing this form, I certify that I have read and agree to the student responsibilities and instructions of this agreement. (See attached)

Student Signature: _____ **Date:** _____

EKU ADVISOR SECTION

Upon consulting the student's academic records, I certify that the courses above are **required** for the student's ECU degree and will transfer to ECU (list any exceptions here : _____)

EKU Advisor Printed Name Signature

Date

Phone Number

VISITING SCHOOL SECTION - MUST BE COMPLETED BY FINANCIAL AID ADMINISTRATOR

The student named above has registered for the courses listed in the student section of this form. I agree that if the student's enrollment status or classes change, I will notify Eastern Kentucky University. I further agree **NOT** to process financial aid for this student.

Term/Academic Year: _____ Beginning and ending dates: _____

Cost per credit hour: _____ Total Tuition Cost this Term: _____

Printed Name of Financial Aid Administrator

Title

FAA Signature

Date

Phone Number

Email Address

Return completed form to: **EKU Office of Student Financial Assistance**, Whitlock Bldg. CPO 59, Room 251,
521 Lancaster Ave., Richmond, KY 40475. You may also fax completed form to 859-622-2019.