**DOMESTIC CONSORTIUM AGREEMENT**

***Office use only:***

**Term: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of hours: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Course Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

As allowed in Part 668.5, Written arrangements to provide educational programs, Code of Federal Regulations, this Consortium Agreement is entered into between the **HOME** institution, the University of North Texas in Denton, TX and the **HOST** institution, for the purpose of providing federal financial assistance to the named student.

**CERTIFICATION: HOME INSTITUTION**

**Y N**

The University of North Texas agrees to accept as transfer credit satisfactorily completed course(s) earned at the Host Institution and approved by the UNT Academic Advisor.

**UNT REGISTRAR**

**Approved Course Name and Number at Host Institution:**

**Applies/ Does not Apply to UNT degree**

**UNT Degree Program:**

**Classification:**

***Host Institution/ Location:***

***Email Address:***

***Telephone Number:***

***UNT ID:***

***Student Name:***

**Student Certification**

I understand eligibility for aid is determined through the Free Application for Federal Student Aid (FAFSA), which must be completed for each applicable year (Fall/Spring, Summer). Disbursement based on UNT’s semester will only be made to eligible applicants whose enrollment has been verified.

I further understand that UNT monitors satisfactory academic progress at the end of each UNT Term. It is my responsibility to provide a transcript from the Host institution to the UNT Registrar’s office at the end of each term.

I certify the information contained on this form is correct. I understand that if I purposely give false or misleading information or forged signatures on this form, I may be fined $20,000, sent to prison, or both; and it may result in the cancellation or repayment of all or part of my financial aid. I understand that I must sign and return this form for my financial aid to be processed.

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The above named student has permission to study at the HOST campus for the period stated. The credits earned by the student through the HOST Institution are acceptable toward graduation in the student’s program of study and not offered at the University of North Texas.

**UNT Academic Department:**

**Academic Advisor’s Signature/ Phone Number & Email:**

**University Of North Texas Registrar’s Signature**

**Title/ Date**

Name: ID #

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| --- |
| **HOST INSTITUTION CERTIFICATION** |
|  |
| **TO BE COMPLETED BY HOST INSTITUTION'S FINANCIAL AID OFFICE** |
| ***Cost of Attendance Budget*** | **UNT Office Use Only** |  | The Host Institution agrees that it will not pay the student a Pell Grant and/or any Campus-Based Funds, and will not certify a Direct Student Loan during the “Dates of Enrollment.”Further, the Host Institution agrees that, if aware, it will inform the University of North Texas if the student withdraws before the end of the “Dates of Enrollment.”**Host Institution Financial Aid Administrator** **Title Date** |
| UNT | Difference |
| Tuition/Fees | $ |  |  |
| Room/Board | $ |  |  |
| Books | $ |  |  |
| Travel | $ |  |  |
| Personal | $ |  |  |
| ***Total*** | $ |  |  |

|  |
| --- |
| **TO BE COMPLETED BY HOST REGISTRAR OR FINANCIAL AID OFFICER** |
| Number of Enrolled Credits: This Constitutes: FT 3/4 1/2 TimeLength of Enrollment Period: WeeksFirst Class Date: Last Class Date:  |  | The Host Institution certifies that the student is enrolled for the “Dates of Enrollment” and the Host Institution certifies that it is eligible to participate in all the Federal Student Aid programs. **Host Institution Financial Aid/ Registrar Signature** **Title Date** **Phone Fax** |

***Return this completed form with required documentation to:***

*Student Financial Aid & Scholarships, University of North Texas - 1155 Union Circle #311370, Denton, TX 76203-5017*

*or scan as PDF and email to* *specialprograms@unt.edu*



**Consortium Agreement Instructions**

\* The Host Institution is the institution at which you will be studying. UNT is considered the Home Institution.

**IMPORTANT REMINDERS:**

* Only coursework that is approved by your academic advisor will be considered toward Financial Aid eligibility at UNT. Only courses that are not offered at UNT but required for your degree plan will be considered.
* The student must complete the financial aid application process and be meeting UNT’s Satisfactory
* Academic Progress (SAP) guidelines to be awarded and disbursed aid.
* The Consortium Agreement must have the amounts written-in for each budgetary item (if applicable). We are **unable** to process agreements if a separate price/cost list for the program is attached to the Consortium Agreement.
* Financial aid disbursement will be completed after proof of enrollment has been sent to specialprograms@unt.edu.
* Transcripts from the Host institution must be sent to the UNT Registrar’s Office at the conclusion of each semester/term.

The Consortium Agreement should be completed in the following order:

***Page one to be completed by student / UNT Registrar/ Academic Advisor***

* **Student information**
* **Degree/ Course Information:** Completed and signed by your UNT Academic Department Advisor (Your Departmental Advisor is the person with whom you meet to review your official UNT Degree Plan).
* **UNT Registrar’s Signature:** Completed by the UNT Registrar’s Office
* **Student Certification**

***Page two to be completed by Host Institution***

* Cost of attendance must be completed by the Host Institution’s Financial Aid office. No separate attachments are accepted.
* The completed Consortium Agreement Form with all signatures must be returned to UNT. Electronic signatures will not be accepted. No aid will disburse until the Consortium Agreement Form is received and proof of enrollment is emailed to specialprograms@unt.edu.

Questions about this form may be sent to specialprograms@unt.edu