

Consortium Agreement

This consortium agreement is entered into between the institutions listed below for the purpose of providing federal financial assistance to the named student. This agreement specifies that only one institution, the "home institution", may award federal financial assistance. As the "home institution", Northeastern University is responsible for awarding and disbursing federal aid when its students study at the "host institution." The "host institution" is responsible for certifying the student's enrollment status as well as tuition and fees.

This form may be used for courses approved to be taken elsewhere, provided the student:

- Is in a degree-seeking program at Northeastern University
- Has completed all application materials and has been awarded financial assistance as a Northeastern University student in good academic standing
- Submits this form, completed and signed
- Submits a copy of the approved Petition to Transfer Credit form indicating that each class taken at the host institution is a requirement of the degree the student is seeking
- At the conclusion of the consortium term, submits a copy of the transcript from the host institution to Northeastern University for determination of Satisfactory Academic Progress
- Makes arrangements for the transfer of financial aid funds to the host institution by the appropriate deadline for bill payment. Northeastern University does not automatically send the funds to the host institution on behalf of the student.

TO BE COMPLETED BY THE STUDENT AND FORWARDED TO HOST INSTITUTION:

Student Name: _____ NU ID or SSN: _____

Permanent Address: _____

Home Phone Number: _____ Cell Phone Number: _____

Home Institution: **Northeastern University**

Host Institution: _____

For: 20___ fall semester 20___ summer semester
 20___ spring semester

I am requesting to use the following forms of financial aid:

Federal Stafford Loan Federal Pell Grant State Grant
Federal PLUS Loan Federal Campus-Based Program

I certify that the above information is true and complete, and I will notify Northeastern University's Office of Student Financial Services if any of this information changes.

Student Signature: _____ Date: _____

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Northeastern University

Student Financial Services

354 Richards Hall fax: 617.373.8735
360 Huntington Ave sfs@northeastern.edu
Boston, MA 02115 studentfinance.northeastern.edu

TO BE COMPLETED BY THE HOST INSTITUTION:

Name of Program: _____

Program Address: _____

Contact Person: _____ Title: _____

Phone Number: _____ Fax Number: _____

Length of Program (in weeks): _____ Number of Terms: _____

Starting Date: _____ Ending Date: _____

Actual Enrollment Hours: _____ Student Expenses (in U.S. Dollars):

Full-time	Tuition and Fees: \$ _____
3/4 time	Room and Board: \$ _____
1/2 time	Transportation: \$ _____
Less than 1/2 time (not eligible for federal aid)	Books and Supplies: \$ _____
	Personal and Misc.: \$ _____

Is your program providing this student with any non-federal financial assistance?

No Yes. Please describe type of assistance and amount provided: _____

CERTIFICATION

- The host institution certifies that the above-named student has been accepted for enrollment in the program listed above.
- The host institution agrees not to pay the student Federal Pell Grant and/or federal campus-based funds or certify a Federal Stafford or PLUS loan during the enrollment period(s) listed above.
- The host institution agrees to notify Northeastern University if the student withdraws from the program before its conclusion. Satisfactory conclusion of the program will be evidenced by an academic transcript upon request by the student.
- Northeastern University agrees to disburse financial aid to the student, if eligible, under the programs listed above for the appropriate period of time. Payment to the host institution will be made by the student.

Signature: _____ Date: _____

Printed Name and Title: _____

Please return to:

Northeastern University
Student Financial Services
354 Richards Hall
360 Huntington Ave
Boston, MA 02115

ATTN: _____