CONSORTIUM AGREEMENT

Purdue University North Central
Office of Financial Aid
1401 S. US Hwy. 421
Westville, IN 46391 (219) 785-5460 Fax (219) 785-5653

According to federal regulations, a Consortium Agreement must exist before a home institution can process an application for federal funds for students attending another institution. Therefore, the two institutions named below herein enter into a Consortium Agreement for:

Student's Name _____ SS# _____
Home Institution PURDUE UNIVERSITY NORTH CENTRAL

Host Institution _____

TO BE COMPLETED BY STUDENT

(Answer only if applicable) I will be taking ____ credit hours through PNC concurrently while taking ____ credit hours through the host institution. I understand that if I drop credit hours or withdraw completely during the term specified, I may be required to repay financial aid (including student loans) disbursed through the PNC Office of the Bursar.

I also understand that I must be registered at least half-time at Purdue University North Central during the semester for which this Consortium Agreement is requested.

Student's Signature _____ Date _____

TO BE COMPLETED BY THE ACADEMIC/DEPARTMENTAL ADVISOR

I certify that the above named student has been approved to enroll at above-mentioned host school for the _____ semester session. I also certify that the credit hours will count toward the student's degree requirements and to the best of my knowledge, will transfer back to be recorded on the student's PNC transcript.

Advisor's Signature _____ Printed Name _____Date _____

TO BE COMPLETED BY THE HOST INSTITUTION FINANCIAL AID OFFICER

ENROLLMENT DATA:
Terms: Summer I _____ Fall Semester _____ # of Credit Hours _____
Summer II _____ Spring Semester _____
Dates: From _____ To _____
mo/day/year mo/day/year

COST OF ATTENDANCE:
Actual costs at Host Institution: Tuition & Fees $_____
NOTE: Include only tuition and fees that are payable by state grant funding.

CERTIFICATION:
The Host Institution agrees NOT to provide federal aid funds to the above-mentioned student for the term(s) specified.

Signature/Title for the Host Institution _____Phone_____

TO BE COMPLETED BY THE HOST INSTITUTION REGISTRAR

I agree to notify the Financial Aid Office at PNC within 30 days if the above-mentioned student withdraws from course(s) during the specified term for which financial aid is being processed and disbursed by the home institution.

Registrar's Signature & Printed Name _____ Date _____

HOME INSTITUTION FINANCIAL AID OFFICE CERTIFICATION

Purdue University North Central, Westville/Home Institution agrees to provide payment(s) to the above-mentioned student, if eligible under the Pell Grant, and/or Stafford/FFEL programs for the terms specified above.

Signature/Title for the Home Institution _____ Date _____