

Title

CONSORTIUM AGREEMENT FOR STUDENTS PARTICIPATING IN A STUDY ABROAD PROGRAM

INSTRUCTIONS: Sections 1 and 2 are to be completed by the **student** and faxed or uploaded to the Office of Student Financial Aid Services (OSFAS) at the University of Connecticut. **Do not submit to Host school. NOTE:** Student must meet all applicable eligibility requirements before financial aid will be processed. Academic Year 2021-2022

University of Connecticut Student Financial Aid Services 233 Glenbrook Road Unit 4116 Storrs, CT 06269-4116

Upload Completed Form To: https://financialaid.uconn.edu/guidelines/

Phone: (860) 486-2819 E-mail: financialaid@uconn.edu Website: financialaid.uconn.edu

SECTION 1: Student Information				
Last Name		First Name		MI
Student ID	Telephone Number		Cell Phone Number	
SECTION 2: Host Institution Information - To Be Completed By Student				
This agreement is between the University of Connecticut ("Home" Institution) and:				
Host School/Institution:				
Name of Program Study:				
Approximate Dates of Enrollment:toto				
REQUIRED: HOST Email address:and/or FAX Number				
Student should fax or upload the form to the OSFAS. Once received, this agreement will be faxed to Host Institution by the OSFAS				
SECTION 3: To Be Completed By "HOST" Institution-NOT by student				
Length of Program (indicate in weeks or quarters):				
Airfare \$	Loca	l transportation \$	Other \$	
Is the "Host Institution" providing the student with any financial assistance, (i.e., grant, scholarship, employment, loan) for the term specified above?				
SECTION 4: Certification (Form cannot be processed by Home school without Host school certification)				
 The "Host" Institution certifies that the student listed has been accepted for enrollment in the program listed above. The "Host" Institution agrees to notify the "Home" Institution if the student withdraws from the program before its conclusion. Satisfactory conclusion of the program will be evidenced by academic transcript upon written request of the student. The "Home" Institution agrees to provide payment to the student, if eligible, under the programs listed above for the appropriate period of time. Payment will be made in such a manner as agreed to between the "Home" Institution and the student. 				
Signature for the "Home" Institution	Date	Signature for the	he "Host" Institution	Date
Name (type or print clearly)	Name (type or	Name (type or print clearly)		

Title/Institution Name

STA04F (rev 12/2020)