CONSORTIUM AGREEMENT FOR STUDENTS PARTICIPATING IN A STUDY ABROAD PROGRAM

INSTRUCTIONS: Sections 1 and 2 are to be completed by the student and 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.

SECTION 1: Student Information

Last Name | First Name | MI
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Student ID | Telephone Number | Cell Phone Number
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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: __________________________ to __________________________

REQUIRED: HOST Email address: __________________________ and/or FAX Number __________________________

Student should 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): __________________________

Number of credits student is expected to earn upon completion of the program: __________________________

Cost of Program:

Tuition & Fees $ __________________________
Room & Board $ __________________________

Books & Supplies $ __________________________
Personal Expenses $ __________________________

Airfare $ __________________________
Local transportation $ __________________________
Other $ __________________________

Is the "Host Institution" providing the student with any financial assistance, (i.e., grant, scholarship, employment, loan) for the term specified above?

☐ No ☐ Yes If yes, specify the amount: $ __________________________; Type of Financial Aid: __________________________

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
--- | ---

Name (type or print clearly) | Title/Institution Name
--- | ---

Signature for the "Host" Institution | Date
--- | ---

Name (type or print clearly) | Title
--- | ---

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) 486-1111
E-mail:onestop@uconn.edu
Website: financialaid.uconn.edu

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