

**Consortium Agreement
STUDY ABROAD**

Last Name, First Name	SSN	Emple ID (Not required at BC)
Street Address ()	City, State	Zip Code
Phone Number	Email	

Host Institution	
Dates of Enrollment	
Semester	

This consortium Agreement is entered into between **CUNY Brooklyn College** and _____
_____ (**host institution**) for the purpose of providing federal, and, if applicable, state financial assistance to the degree seeking, matriculated student listed above. The completed document must be on file with all concerned parties before any financial aid funds will be disbursed for the period of enrollment specified in the agreement.

Will you be enrolled at both the home and host campus for the period of enrollment covered by this agreement? _____ **YES** _____ **NO**

By checking this box, I certify that I am a matriculated student at **CUNY Brooklyn College**. I am requesting that the home institution process my financial aid while I am taking courses at the host institution. I acknowledge that the courses I am taking can be used toward that completion of my degree at the home institution. I consent to the release of my financial aid information by the home institution to the host institution.

I understand that I am responsible for using financial aid disbursed to me to cover any charges due to the host institution for the period of enrollment specified in this agreement, and I may be responsible for repaying some, or all of, the aid disbursed to me if I fail to begin attendance or withdraw from courses.

I acknowledge that I am responsible for submitting an official transcript of coursework taken at the host institution.

Student's Signature: _____ **Date:** _____

Part 2: To be completed By the International Education and Global Engagement Office at Brooklyn College

A copy of your "**STUDY ABROAD PERMIT/EVALUATION APPLICATION FOR BROOKLYN COLLEGE STUDNETS**" (**COURSE APPROVAL**) which was submitted to the Office of International Education and Global Engagement, is required and must be attached – Rm. 1108 Boylan Hall.

Check if, (COURSE APPROAL) form is attached.

These courses will be applied towards your CUNY Brooklyn College transcript and used towards the completion of your degree.

Part 3: To Be Completed By the Host Institution

Dates of Enrollment: _________ to _________ Semester: _____ Year: _____

Cost of Attendance	
Tuition & Fees	
Room & Board	
Books & Supplies	
Transportation	
Other (Specify)	
Total Cost of Attendance	

***Please attach a copy of the student's outstanding tuition invoice with this form.**

<u>Registered Course#</u>	<u>Registered Course Title</u>

CERTIFICATION

- The host institution certifies that the above-named student is enrolled for stated period of attendance. The host Institution certifies that it will inform **CUNY Brooklyn College** if the student withdraws from any or all courses before the end of the period of enrollment covered by this agreement. In the case of total withdrawal, that information will include, if known, the student's last day of attendance.
- The host institution agrees not to pay the student Pell Grant and/ or any campus based funds and will not certify a Federal Student Loan for the period of attendance.
- The home Institution agrees to monitor the student's satisfactory academic progress, be responsible for disbursing funds to the student and for administering the appropriate refund policy, including the recalculation of any Title IV aid if the student should withdraw.
- The host Institution certifies that it is a Title IV eligible school.

Host Institution's Signature _____ Title _____

Name of Institution _____ Date _____

Institution's Payment Address _____

Telephone # _____ Fax # _____

Part 4: To Be Completed by the Brooklyn College - Financial Aid Office

Financial Aid awards to be received by the student/host institution for the period of enrollment covered by this agreement are as follows:

AWARD	AMOUNT	Disbursement Date(s)
Federal Pell:		
Federal SEOG:		
Direct Loan:		
Other:		

Brooklyn College Signature _____ Title _____ Date _____