

## REQUEST FOR TRANSIENT FINANCIAL AID AND CONSORTIUM AGREEMENT

This form is for degree-seeking WVU students requesting financial aid to pursue courses at another institution. These courses must transfer back as completed credits to WVU or one of its divisional campuses. This includes courses taken during study abroad trips organized through affiliate corporations.

Section 1: Student Information					
Studer	nt Name: WVU ID number:				
I am re	equesting aid for another institution for (check all that apply):   Fall   Spring   Summer  (year) (year)				
Date o	f Birth: Last 4 Digits of SSN: Consortium Period: Aid Year				
Secti	on 2: Consortium Agreement				
Consortium Agreement: An agreement between a home school (WVU) and a host institution which officially acknowledges the enrollment, cost, and admission status of a degree-seeking student pursuing courses at another institution.					
Unde	this consortium agreement, I, the student:				
	Authorize that my information may be released to and obtained from the host institution.				
	Am enrolled as a degree-seeking student in a program at WVU or one of its divisional campuses.				
	Understand that I am responsible for making payment of tuition, fees, or other institutional charges by WVU and/or the host institution regardless of the status of the consortium.				
	Understand that I must notify the WVU Hub if I do not begin attendance in the courses listed and approved in the consortium agreement with the host institution.				
	Understand that I must notify the WVU Hub on my campus and the host institution immediately of any change in enrollment status, including withdrawal from all courses or substitution of approved courses.				
	Understand that I must maintain satisfactory academic progress for financial aid eligibility.				

	☐ Will ensure that the host institution provides the appropriate Registrar Office at my campus with an official academic transcript of my courses taken at the host institution within 30 days of completion of the transient coursework.			
	☐ Understand that my financial aid may be reduced or canceled if my official transcripts from the host institution are not received or do not match the courses approved on my consortium agreement.			
Stu	dent Signature Date			
Sec	ion 3: Submit Necessary Documentation			
Stu	dents must complete the first requirement listed below as well as either the second or third requirement.			
	☐ I have submitted my Free Application for Federal Student Aid (FAFSA) at studentaid.gov.			
	☐ I am taking courses at another school, and I have submitted the Transient Credit Application to my academic advisor (Advisor Name)			
	OR			
	☐ I am taking courses through a study abroad affiliate, and I have requested international equivalencies from the Education Abroad Office.			
Sec	ion 4: Information about Other Institution (Host Institution)			
U	nder this consortium agreement, the Host Institution:			
	Certifies that the student listed has been accepted for enrollment in an academic program that meets the Title IV student financial aid eligibility requirements.			
	2. Will make available applicable student consumer information required under Title IV.			
	3. Will provide WVU with documentation of the student enrollment at the Host Institution.			
	4. Agrees to notify WVU if the student fails to enroll in, or withdraws from, the Host Institution, including the withdrawal date and other relevant information.			
Н	ost Institution's Name:			
F	nancial Aid Contact: Contact Email:			
F	nancial Aid Contact Signature:			

(Contact **must be able** to verify the number of hours enrolled, courses, dates of enrollment, and cost of attendance.)

Student Name:		WVU ID:			
Contact Phone:		Contact Fax:			
Section 5: To Be Completed by	HOST Institution (	Do Not Leave Any Section	Blank)		
Will the student receive financial ai	d at your institution?	Yes 🗆 No			
Student will be enrolled as a: Undergraduate Graduate Number of credit hours enrolled:					
Student will be enrolled:  Full-til	me 🗆 3/4-time	☐ Half-time ☐ Less than Hal	f-time		
Enrollment Dates: From		to			
Provide budgeted expenses for t	he student during t	he consortium period:			
Tuition and Fees: \$	Hou	using & Food: \$			
Book & Supplies: \$	Trai	nsportation: \$			
Misc. Expenses: \$		er (Specify): \$			
List the courses that the student is registered to take at Host Institution and for which you will monitor enrollment status for WVU:					
COURSE NAME	CREDIT HOURS	COURSE NAME	CREDIT HOURS		

Student Name:	WVU ID:
Section 6: To Be Completed by HOME Institution (WVU)	

## I, the WVU Financial Aid Counselor, hereby agree to:

- Certify that the student is making satisfactory academic progress toward completion of their degree program of study at WVU.
- 2. Process the student's Title IV financial aid application and provide payment of Title IV funds, if eligible, as appropriate for the consortium agreement period.
- 3. Make available applicable student consumer information required under Title IV.
- 4. Ensure that the WVU Office of the University Registrar conducts Enrollment Reporting to the National Student Loan Data System.
- 5. Calculate returns for Title IV funds, when appropriate.
- 6. Maintain Title IV recordkeeping and reporting requirements.
- 7. Disburse financial aid which will be released directly to the student who is responsible for paying the charges at the host institution. Disbursement of aid will occur at the beginning of the enrollment period listed above but will not be earlier than the first disbursement date at WVU for the semester for which aid is requested.

8.	Document and monitor student enrollment i applicable):	in WVU coursework taken during the consortium period (if			
9.	Provide budgeted expenses for the student's <b>WVU</b> coursework (if applicable) during the consortium period				
	Tuition and Fees: \$	Housing & Food: \$			
	Book & Supplies: \$	Transportation: \$			
	Misc. Expenses: \$	Other (Specify): \$			
Cou	nselor Name:				
Cou	nselor Signature:	Date:			

Please return this agreement by submitting an online request at hub.wvu.edu/contact or via fax at 304-293-4890.

If you have any questions, please contact the WVU Hub online or by phone at 304-293-1988.

When completed, this form contains information protected under the Family Educational Rights and Privacy Act (FERPA) as part of the Privacy Act of 1974. WVU is an EEO/Affirmative Action Employer – Minority/Female/Disability/Veteran.

hub.wvu.edu/contact