

Frostburg State University

Consortium Agreement

A consortium agreement is a written contract between two or more Title IV eligible institutions enabling students to take coursework at different institutions simultaneously for the purpose of completing a degree. Under such an agreement, students may take courses at a "host institution" and have those courses count toward the degree or certificate at the "home institution".

The student's home institution (FSU) is the institution that will grant the student's degree or certificate. It is also the institution that will process, award, and disburse the financial aid. The "host institution" will be responsible for certifying the student's enrollment status and the costs for tuition and fees.

To receive loans from the "home institution", the student's enrollment status (the combination of hours between the home and host institutions) must be at least six hours.

Listed below are the guidelines that apply to students interested in participating in a consortium agreement:

1. Students must be degree seeking at their home institution (FSU).
2. Students must be enrolled for at least one course at the home institution (FSU).
3. Each class taken at the "host institution" must be considered a requirement of the degree that the student is seeking.
4. The student must complete and submit to the Financial Aid Office an Authorization for Attendance at Another Institution form from the Registrar's Office before the consortium agreement will be approved.
5. Students are responsible for having the host institution complete the consortium application and for submitting this completed form to the Financial Aid Office.

6. Students are advised to make financial arrangements with the host institution by the appropriate deadline for bill payment, since arrangements for a consortium agreement may take several weeks and refunds cannot be given out early. FSU does not and cannot transfer funds directly to another institution on a student's behalf. This means that the other school must be paid up front and out-of-pocket unless the host institution's billing office will grant extensions/deferments for consortium students.
7. Consortium agreements are not applications for "extra" financial aid. Consortium agreements merely allow a student to get the same amount of financial aid he or she would normally receive for registering for all of his or her classes at FSU. Furthermore, **FSU does not automatically send funds to the host institution on behalf of the student.** Financial aid is only applied to a student's bill at FSU. If a credit balance is created by financial aid funds, then a refund is processed and released to the student. It is the responsibility of the student to use any refund to pay his or her bill at the host institution.
8. Consortium agreements expire at the end of each semester. Therefore, students seeking to participate in a consortium agreement for more than one semester must reapply with a new application each semester.
9. At the conclusion of the consortium semester, students must submit a copy of their grade transcripts to the Financial Aid Office at FSU to determine if the student meets Satisfactory Progress Standards (SAP). Failure to provide the transcript will prohibit aid from being processed for subsequent semesters.
10. The home institution will accept grades from the host institution in the same way as if the coursework was taken at the home institution itself. For example, if a "D" were not acceptable for a particular course taken at the home institution, then a "D" from the host institution for the same course would not be accepted as transferable credit/s.
11. **Please note that we cannot process Consortium Agreements for students trying to transfer in nursing course from another university. Nursing majors may use a Consortium Agreement for non-nursing courses that will transfer into FSU. Additionally, Consortium Agreements cannot be done for students who are taking any classes at MORGAN STATE UNIVERSITY.**

Frostburg State University

CONSORTIUM APPLICATION

TO BE COMPLETED BY STUDENT:

Student's Name _____ FSU ID# _____

Enrollment Dates from _____ to _____
(mm/dd/yr) (mm/dd/yr)

Name of Host Institution _____

Host Institutional ID# or SSN _____

Number of credit hours at host institution _____

Number of credit hours at home institution (Frostburg State) _____

TO WHOM IT MAY CONCERN;

My signature below verifies that the above information is correct and the coursework I am enrolled for at the host institution will lead to a degree at Frostburg State University. In addition, I understand there are specific regulations I must adhere to in order to meet Satisfactory Progress Standards as defined in the Consortium Procedures that I have read and understand. Also, any deviation of courses from the pre-approved courses may result in the loss of federal and FSU financial aid for the following semester.

Furthermore, my signature indicates my permission for the host institution to provide enrollment information and permission to release my grades, verbally or written, to Frostburg State University's Financial Aid Office.

(Student's signature)

(Date)

Student Name: _____

SSN or Host School ID#: _____

TO BE COMPLETED BY THE CONSORTIUM (host) INSTITUTION

The above student has indicated enrollment at both your institution and Frostburg State for the semester indicated. In order for our office to process financial aid for this student, we are requesting the following information as specified by the consortium agreement between our institutions.

Course Title	Credits	Course Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tuition and fees for the number of credits listed _____

By signing this agreement the HOST institution verifies that the student listed above will not receive **federal** financial aid, during the term in attendance, from the HOST institution. The HOST institution will notify **Frostburg State University** of any changes in enrollment during the period above in a timely manner. Any enrollment changes must be faxed to 301-687-7074; Attention: Financial Aid Director.

Name of Host Institution Representative	Signature
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Title of Host Institution Representative	Date
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Host Telephone and FAX Numbers

Please return completed form promptly to:
Kelli Izat Kidwell, Financial Aid Counselor
Financial Aid Office
Frostburg State University
101 Braddock Road
Frostburg, Maryland 21532
FAX: (301) 687-7074