



Application for Consortium/Contractual Agreement

Student Name: _____

Student ID: _____

Tech E-Mail: _____

Phone: _____

Request that a consortium/contractual agreement be made on my behalf for _____ semester, 20____, between:

1. Host Institution

And

Home Institution

Montana Technological University
Financial Aid Office
1300 West Park Street
Butte, MT 59701

Classes to be taken at the Host Institution:

Home Credits: _____

| <u>Class #</u> | <u>Class Name</u> | <u>Credits</u> |
|----------------|-------------------|----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Total enrollment credits at both
Host and Home Institutions:

Total Credits: _____

I certify the above-named student has been approved for course work at the Host School and that the credits will be accepted toward the student's degree at Montana Technological University. Consortium agreements will not be processed without this signature.

| | | | |
|-------------------|----------------------|-------|-----------|
| _____ | _____ | _____ | _____ |
| Advisor/Registrar | Printed Name & Title | Date | Telephone |

2. Completed by Financial Aid Host Institution

3. Home Institution Section

Total Credits _____

Period of Enrollment
From _____
To _____

Total Credits _____

Semester _____

Tuition & Fees \$ _____

Books & Supplies \$ _____

Room & Board \$ _____

Other Expenses \$ _____

Total \$ _____

Tuition & Fees \$ _____

Books & Supplies \$ _____

Room & Board \$ _____

Other Expenses \$ _____

Total \$ _____

| | | | |
|------------------------------|----------------------|-------|-----------|
| _____ | _____ | _____ | _____ |
| Host Institution's Signature | Printed Name & Title | Date | Telephone |

| | |
|------------------------------|-------|
| _____ | _____ |
| Home Institution's Signature | Date |

1. The institutions named above agree to enter into an agreement as allowed by Part 668019, Student Assistance Gen. Provisions.
2. The Host institution agrees NOT to provide financial assistance to the student for the term as listed,
3. In case the student withdraws from school, the Host institution agrees to promptly notify Montana Technological University in writing so that adjustments or cancellation of aid can be made where appropriate.

I certify that the information provided on this form is true and complete to the best of my knowledge. By signing this form, I acknowledge that I have read and agree with the terms stated on the Student Certification Agreement, accompanying this form. **I understand that I am responsible for paying any charges at the Host Institution. I have read the Student Certification Agreement (Initials)** _____

Student Signature (Required)

Date

Student Certification for Consortium/Contractual Agreement

1. I understand that either Host or Home Institution may decline to participate in this consortium agreement.
2. During Fall or Spring Semester (not Summer) a consortium will not be granted unless the term at the host is a minimum of 15 weeks. In some cases, the student may choose to enroll at Montana Technological University concurrently to satisfy this requirement
3. I understand that I must be fully accepted in a certificate, undergraduate, or graduate degree program at Montana Technological University and that courses I am taking at the Host Institution must be transferable and apply toward my degree at Montana Tech.
4. I understand that I must be registered at the Host school before any Title IV financial aid will be disbursed to me from Montana Technological University.
5. I understand that it is my responsibility to pay for costs at the Host school and other costs not covered by financial aid.
6. Aid can be disbursed only after I have an official award and verification of enrollment, but no earlier than first business day prior to the first day of classes based upon Montana Technological University's academic calendar.
7. I understand that disbursement of my financial aid will be released directly to me and payments to the Host school are my responsibility.
8. I must arrange to transfer credits earned from the Host Institution to Montana Technological University at the end of the term of the Host Institution. An official transcript from the Host Institution is required whether I complete or pass the course(s) or not.
9. I understand that financial aid for future terms will not be released until transfer credits have been received and satisfactory progress has been met.
10. I understand repayment of financial aid, including loans, disbursed by Montana Technological University may be required if I (1) drop during the refund period, (2) withdraw (officially or unofficially), or (3) credits are not transferred to Montana Technological University.
11. By my signature on the Application for Consortium/Contractual Agreement, I authorize the Host Institution listed to release enrollment, financial and academic information to Montana Technological University.