

CONSORTIUM AGREEMENT MILLERSVILLE PARTNER PROGRAMS

STUDENT NAME

STUDENT ID

PREFERRED EMAIL

PHONE NUMBER

GENERAL INFORMATION

This form confirms reasonable, education-related costs for an external partner program so the Office of Financial Aid (OFA) can evaluate the Cost of Attendance (COA) adjustment. An approved adjustment does not increase aid eligibility; it provides additional room within the students' COA so they can obtain or borrow additional resources to accommodate increased expenses. Completion of this form also affirms that Millersville is the student's home institution, the degree-granting school that will process any eligible financial aid.

INSTRUCTIONS

The student must complete the contact information at the top of Page 1 before submitting the form to their program coordinator or authorized program contact. The program representative must then complete all remaining sections on both Page 1 and Page 2. Once all sections are fully completed, the form should be returned to Millersville University's Office of Financial Aid.

PARTNER PROGRAM & EXPERIENCE INFORMATION

PROGRAM NAME:

LOCATION (CITY, STATE):

TERM(S) ENROLLED:

☐

SUMMER 20____

☐

FALL 20____

☐

SPRING 20____

START DATE:

END DATE:

LOCATION (CITY/STATE OR SITE):

COORDINATOR / PROGRAM CONTACT INFORMATION

All required sections must be completed by an authorized program representative and submitted in full to Millersville University's Office of Financial Aid for processing.

FIRST AND LAST NAME

PHONE NUMBER

DEPARTMENT / ORGANIZATION

EMAIL

ESTIMATED COSTS & PAYEE INFORMATION — HOW TO COMPLETE THIS SECTION

Enter the full-term estimated costs for each category in U.S. dollars. Then, for every item with an amount, check one box to show who receives the payment. This determines how the student's financial aid may be applied.

How To Choose the Correct "Paid To" Box:

- **Paid to MU:** Select this if Millersville charges the student for this item (e.g., MU tuition or fees).
- **Paid to Org:** Select this if the **partner program** bills the student directly (e.g., program-specific fees charged by Blackbird, CBFS, etc.).
- **Paid to Other:** Select this if the student pays an **external party** (e.g., off-site housing, groceries, transportation, personal expenses).

When to Include Notes:

If any item is already included in the program's tuition or fees, note "included in tuition" or "included in program fee" in the Notes column. **Examples:**

- Housing and meals included in tuition/program charge
- Books or supplies included in tuition/program charge

Determining Estimates:

For items such as **food, transportation, or personal/miscellaneous costs**, use your **best reasonable estimate** based on the location of the program and expected student needs.

Cost Category	Estimated Amount (USD)	Paid to MU	Paid to Org	Paid to Other	Notes
Tuition	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fees	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Housing/Lodging	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food/M meal Plan	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Books/Supplies/Tech	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transportation	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal/Misc.	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PARTNER PROGRAM AND MILLERSVILLE CERTIFICATIONS

As the program coordinator or authorized party, I certify the estimates below reflect reasonable, education-related costs for the dates indicated. I understand MU may request additional information if needed.

SIGNATURE OF PROGRAM OFFICIAL

DATE

MILLERSVILLE UNIVERSITY will determine aid eligibility and disburse funds per Title IV regulations. Disbursement requires a completed Consortium Agreement from the Host Institution and all other student requirements.

MILLERSVILLE FINANCIAL AID OFFICIAL: __Emiyaril Alvarez__

TITLE: __Director of Financial Aid

SIGNATURE OF FINANCIAL AID OFFICIAL: __*Emiyaril Alvarez*__

PHONE: __717-871-5100__

RETURN COMPLETED FORM TO:



fa.mail@millersville.edu



717-871-7980



Millersville University - Financial Aid
PO Box 1002, Millersville PA 17551