

2021-2022 GRADUATE CONSORTIUM

STUDENT NAME

MILLERSVILLE ID NUMBER

CONTACT PHONE NUMBER

HOST INSTITUTION ID NUMBER

NAME OF HOST INSTITUTION

GENERAL INFORMATION

A Consortium Agreement is an agreement between two colleges/universities to recognize your registration at each location for financial aid purposes. It also certifies only one of the two institutions can administer Title IV and State financial aid. This form certifies that MILLERSVILLE UNIVERSITY, the "Home Institution", is entering into a Consortium Agreement with the college/university listed, the "Host Institution". It is anticipated that this student will receive his/her degree from the "Home Institution", Millersville University.

TERM/SEMESTER INFORMATION

Please check the semester for which you are completing this Consortium Agreement. You must complete a new form for each semester you are requesting financial aid under a Consortium Agreement.

SUMMER 2021 FALL 2021 SPRING 2022

To be eligible for a Consortium Agreement for the FALL or SPRING semesters, you must either be:

- a. Enrolled in at least 1 credit at Millersville for the semester you are requesting a consortium agreement,
- OR**
- b. If you are NOT enrolled in any credits at Millersville – you must be on a Leave of Absence at Millersville.
 - To apply for a Leave of Absence, please contact Millersville University Registrar's Office @ 717-871-5005

STUDENT RESPONSIBILITIES

In order to process your Consortium Agreement, you must check each item listed below to confirm that you have read, understand, and agree that the following is the student's responsibility:

1. You must submit a copy of the "Authorization for Transfer of Credit" form to the Millersville University Registrar's office for the classes you are taking at your "Host Institution".
2. After you register for your classes at the "Host Institution", submit this form to them. Ask them to complete page 2 and return to Millersville University Office of Financial Aid.
3. Request an official transcript from the "Host Institution" be sent to Millersville University Registrar's Office at the conclusion of the semester for the credits covered by this Consortium Agreement.
4. Notify Millersville University Office of Financial Aid in the event of a change in your enrollment or withdrawal from any course. A change in your enrollment status may affect your financial aid eligibility.
5. Sign the Consortium Agreement. By signing this Agreement, you are granting MU's Office of Financial Aid the ability to release financial aid eligibility information to the "Host Institution", if requested.
6. THE STUDENT IS RESPONSIBLE FOR MAKING PAYMENT ARRANGEMENTS WITH THEIR "HOST INSTITUTION" AS DUE. FINANCIAL AID REFUNDS WILL NOT BE PROCESSED UNTIL AFTER THE START OF THE SEMESTER. REFUNDS ARE NOT GUARANTEED TO BE PROCESSED PRIOR TO BILLS ARE DUE AT YOUR "HOST INSTITUTION".

SIGNATURE & ACKNOWLEDGEMENTS

By signing below, I agree to the above responsibilities and confirm the information provided is accurate and complete.

STUDENT SIGNATURE

DATE

2021-2022 GRADUATE CONSORTIUM

SIGNATURE & ACKNOWLEDGEMENTS

All of the below information is to be filled out by a Financial Aid professional at your Host Institution and returned to Millersville's Office of Financial Aid.

Institution Name: _____

Mailing Address: _____
STREET CITY STATE ZIP

Telephone #: _____ Fax #: _____

Name of Financial Aid Official: _____ Title: _____

Signature of Financial Aid Official: _____ Title: _____

ENROLLMENT INFORMATION

Dates of enrollment period under this Consortium Agreement: _____ to _____

Course Dept. and Number	Course Title	Credits	Online/Blended Credits	Length of Course

ENROLLMENT INFORMATION

Complete the following information using your costs for the enrollment period list above. Please attach a copy of the student's schedule and bill when returning this form to Millersville.

DESCRIPTION	AMOUNT
Tuition	
Fees	
Room	
Board	
Personal	
Transportation	
Books/Supplies	
TOTAL	

Please return the completed Consortium Agreement to:
**OFFICE OF FINANCIAL AID
MILLERSVILLE UNIVERSITY
PO BOX 1002
MILLERSVILLE PA 17551**

MILLERSVILLE UNIVERSITY AGREEMENT

MILLERSVILLE UNIVERSITY agrees to process the student financial aid application, determine eligibility and disburse funds in accordance with the Title IV regulations. Funds will only be disbursed to the student if an official Consortium Agreement has been completed by the "Host Institution" and returned to Millersville University's Office of Financial Aid.

Name of Financial Aid Official: Francis Ozuna Title: Secretary to the Director of FA

Signature of Financial Aid Official: Francis Ozuna Phone: 717-871-5100