

# 24-25



**Office of Student Financial Aid**  
**150 Tirey Hall, Terre Haute, IN 47809**  
 Phone: (812) 237-2215 or (800) 841-4744  
 Fax: (812) 237-4330 or (812) 237-3925  
 Email: [ISU-finaid@mail.indstate.edu](mailto:ISU-finaid@mail.indstate.edu)  
 Website: [www.indstate.edu/financial-aid](http://www.indstate.edu/financial-aid)

## Consortium Agreement

(Use black or blue ink to complete this form)

\_\_\_\_\_  
 Student First Name M.I. Last Name ISU University ID Number

Sections A, B, C, and D must be completed prior to submitting to the ISU Financial Aid Office for Processing.

### SECTION A. General Information

Host School Student ID Number: \_\_\_\_\_

This document constitutes a financial aid consortium agreement between Indiana State University, (HOME School), Terre Haute, IN 47809 and the HOST School: \_\_\_\_\_, located in \_\_\_\_\_, zip \_\_\_\_\_.

### SECTION B. Student Certification – You must read, complete, and sign this section.

- (1) I am a degree-seeking student at Indiana State University.
- (2) I will be taking \_\_\_\_\_ credit hours at Indiana State University while concurrently taking \_\_\_\_\_ credit hours at the HOST school.

Host Course/ Number	Equivalent ISU Course Number	Credit hours	Enrollment Start Date MM/DD/YY	Enrollment End Date MM/DD/YY
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- (3) I understand that Indiana State University will not apply aid to correspondence, independent study or non-credit bearing courses taken at another school. **List here if any of the credit hours are correspondence courses:** \_\_\_\_\_.
- (4) Without the transcript on record, aid for the subsequent term will not be disbursed. I understand that it is my responsibility to request the official transcript from the host school be sent to the Indiana State University Office of Admissions.
- (5) I understand that the transferred consortium credit hours will not reflect in my Indiana State University GPA, but that the consortium activity will be used to determine my Satisfactory Academic Progress (SAP) at ISU and will affect any Honors Program calculations. Failure to maintain SAP will result in the loss of financial aid eligibility.
- (6) **I understand I am responsible for the payment of any and all educational costs incurred at the HOST school.**
- (7) I understand that if I **drop credit hours** or **withdraw completely** from either Indiana State University or the HOST school during the term specified, I could be required to repay the financial aid (including student loans) disbursed through Indiana State University as a result of this consortium agreement. If this should occur, I understand I am financially responsible for the payment of any and all educational costs at ISU and/or the HOST school.
- (8) I understand that I will be notified via e-mail upon the completion and approval (or denial) of the Consortium Agreement. This is for a single term.
- (9) I understand that repeat coursework rules apply in the same manner as they would if I were taking a class through ISU.

*(Electronic signatures will not be accepted)*

\_\_\_\_\_  
 Student Signature (Required) Date

For priority processing, submit ALL required documents by:

<b>Fall:</b> July 1, 2024	<b>Spring:</b> November 15, 2024	<b>Summer:</b> April 15, 2025
---------------------------	----------------------------------	-------------------------------

After these dates, you should be prepared to make payment arrangements with the Bursar's Office.

### SECTION C. Institutional Certification of Consortium Courses

**Take this form to your Department Chair and Academic Dean and have them complete and certify this section.**

**I certify that the courses listed in Section B2 are transferable to fulfill the student's degree requirements.**

\_\_\_\_\_  
 Advisor Signature (Required) Date Academic Dean/Chair Signature (Required) Date

# Consortium Agreement

(Use black or blue ink to complete this form)

Student First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ University ID Number \_\_\_\_\_

## SECTION D. To be completed by the Host School

The HOST School agrees to abide by the guidelines listed below:

- (1) The HOST school agrees not to provide financial aid for the above named student during the specified consortium term with the exception of State of Indiana Aid, Vocational Rehab, outside scholarships or institutional fee waivers without the prior notification to ISU.
- (2) **The HOST school agrees to notify ISU of any change in the enrollment status of the above named student during the specified consortium term.**
- (3) The HOST school agrees to confirm the enrollment hours and cost of consortium hours for the enrollment period in (Section B2) by completing the information listed below. **Exclude credit hours and cost for correspondence courses.**

**NOTE:** Financial Aid is based on a semester system. **Quarter schools:** convert credits to semesters.

Is the student receiving any financial assistance at the HOST School?

- Yes What type: \_\_\_\_\_  
 No Amount: \$ \_\_\_\_\_

Number of enrolled credit hours: \_\_\_\_\_  
Tuition / Fees: \$ \_\_\_\_\_  
Books / Supplies: \$ \_\_\_\_\_  
Housing / Food: \$ \_\_\_\_\_  
Total Cost at HOST School: \$ \_\_\_\_\_

Host Financial Aid Administrator Signature (Required) \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Host Financial Aid Administrator \_\_\_\_\_ Telephone \_\_\_\_\_

Host Address \_\_\_\_\_ Fax \_\_\_\_\_

Host Financial Aid Administrator's Email Address \_\_\_\_\_

Host Bursar Name \_\_\_\_\_ Host Bursar Email Address \_\_\_\_\_

## SECTION E. ISU Terms and Conditions

- (1) ISU is the HOME institution for ALL financial aid matters.
- (2) ISU considers the above named student to be accepted as a degree-seeking candidate. ISU is the degree-granting institution for the above named student.
- (3) ISU will follow the same policy and procedure for repeat coursework that is followed with courses taken at ISU.
- (4) ISU will not apply aid to correspondence, independent study, or non-credit bearing courses taken at another school.
- (5) **ISU will provide financial aid disbursements for the above named student as appropriate (under Title IV guidelines) for the term specified on page one.**
- (6) ISU will accept transfer credits from the HOST school for the previously approved courses for which the student has received a grade of "C" or above on the same basis as if providing the course itself. Grades earned at the HOST school will not be averaged into the student's grade point average at ISU.
- (7) ISU will comply with Satisfactory Academic Progress standards and return of Title IV regulations for all coursework attempted.