



## CONSORTIUM AGREEMENT

This consortium agreement is entered into between the institutions listed below for the purpose of providing federal financial assistance to the named student. This agreement specifies that only one institution, the "home institution", may award federal financial assistance. As the "home institution", Northeastern University can recommend federal and state financial aid programs when its students study elsewhere (at the "host institution") and obtain academic permission in advance to transfer the courses to their Northeastern degree program.

This form may be used for courses approved to be taken elsewhere, provided the student:

- Has completed all application materials and has been awarded financial assistance as a Northeastern University student in good academic standing;
- Submits this form, completed and signed;
- Submits a copy of course transfer petition approved by academic dean (for University College a "Prior Approval of Transfer Credit" form is required);
- Submits documentation of successful completion of courses taken elsewhere.

Prior to taking any course(s) at another institution, the student must receive confirmation that all materials have been received by Northeastern University's Office of Student Financial Services. Furthermore, the student must make arrangements for the transfer of financial aid funds to the host institution.

### TO BE COMPLETED BY STUDENT AND FORWARDED TO HOST INSTITUTION:

Student Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Home Institution: **Northeastern University**

Host Institution: \_\_\_\_\_

For:  20\_\_ fall semester  20\_\_ summer semester  
 20\_\_ spring semester

I am requesting to use the following forms of financial aid:

Federal Stafford Loan  Federal Pell Grant  State Grant  
 Federal PLUS Loan  Federal Campus-Based Programs

I certify that the above information is true and complete, and I will notify Northeastern University's Office of Student Financial Services if any of this information changes.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE COMPLETED BY THE HOST INSTITUTION:**

Name of Program: \_\_\_\_\_

Program Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX #: \_\_\_\_\_

Length of Program (in weeks): \_\_\_\_\_ Number of Terms: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Actual Enrollment Hours: \_\_\_\_\_

Student Expenses (in US \$)

Full-time

Tuition & Fees: \$ \_\_\_\_\_

¾ time

Room & Board: \$ \_\_\_\_\_

½ time

Transportation: \$ \_\_\_\_\_

Less than ½ time

Books & Supplies: \$ \_\_\_\_\_

Personal & Misc.: \$ \_\_\_\_\_

Is your program providing this student with any non-federal financial assistance?

No  Yes - Please describe and give amount(s): \_\_\_\_\_

**CERTIFICATION**

- The host institution certifies that the student listed has been accepted for enrollment in the program listed above.
- The host institution agrees not to pay the student Federal Pell Grant and/or federal campus-based funds or certify a Federal Stafford Loan during the enrollment period(s) listed above. Further, the host institution agrees to notify Northeastern University if the student withdraws from the program before its conclusion. Satisfactory conclusion of the program will be evidenced by an academic transcript upon request by the student.
- Northeastern University agrees to provide payment to the student, if eligible, under the programs listed above for the appropriate period of time. Payment will be made in such a manner as agreed to between Northeastern University and the student.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Host Institution Official (Registrar or Financial Aid Representative)

Printed Name & Title: \_\_\_\_\_

Please return to:

Northeastern University  
Student Financial Services  
356 Richards Hall  
Boston, MA 02117

ATTN: \_\_\_\_\_