



Consortium Agreement

When a student wishes to take courses at more than one institution, a consortium agreement is entered into to allow a student to receive financial aid for courses taken at another college/university while also attending Lincoln University. These guidelines are designed for students who are pursuing an academic program at Lincoln University.

The following items must be met in order to complete the Consortium Agreement process:

- You must be an enrolled student at Lincoln University.
- You must have completed the FAFSA (Free Application for Federal Student Aid) and have been awarded federal financial aid to attend Lincoln University.
- Courses taken at other institutions will be approved for financial aid only if an equivalent course is not offered at Lincoln University during the same semester (allowance will be made for evening (day) students when the course is not offered at Lincoln University during the evening (day)). Academic advisors need to verify this information before approving the student's request to study at another institution.
- Your academic area must approve your request to study at another institution. It is the student's responsibility to obtain that approval. Student must first take consortium agreement to their academic advisor for approval. If agreement is approved, student may take agreement to other institution for approval. If approved by both academic advisor and other institution, consortium agreement must be mailed or faxed to Lincoln University for processing.
- The course period at host institution must coincide with Lincoln University's academic year. Course must be completed prior to any federal financial aid being awarded in the future.
- All course work from previous consortium agreements must be sent and recorded at our Record's Office prior to the consideration of a new consortium agreement request.
- Consortium Agreements must be approved by Host Institution before the Lincoln University Department of Student Financial Aid will process it.
- The Department of Student Financial Aid will not approve a consortium agreement if it is apparent that the course work indicated on the Consortium Agreement does not contribute towards the student's academic program.

Lincoln University
Department of Student Financial Aid
820 Chestnut Street
103 Young Hall
Jefferson City, MO 65101
(573) 681-6156
Fax: (573) 681-5871
financialaid@lincolnu.edu

This form must be completed by all parties and returned to the LU Department of Student Financial Aid at least two weeks before the beginning of the term to provide time for processing and/or adjusting awards and having it not impact refund eligibility of the term.

INSTRUCTIONS TO STUDENT:

You must be in good academic standing at LU. Your courses must be required for your degree program and must be approved by your academic advisor/department head/college dean at LU.

You may attend another institution as a visiting student for a maximum of two semesters. This agreement is for only one academic term, not for an academic year. You must attend LU while taking these other courses.

You must do the following:

1. Provide your complete name, LU student ID, social security number, permanent mailing address, permanent phone number, and email address. If your address will be different while attending the host institution, please provide us with your address and phone number.
2. Provide the complete name and address of the institution you plan to attend as a visiting student.
3. Indicate the term and year you will attend the host institution as a visiting student, and
4. Have the host institution notify your lender of your enrollment status while you are a visiting student. This must be done to keep your loans in deferment.

Your financial aid will be applied to your balance due LU and any funds left will be forwarded to you to transfer over to the host institution. You are responsible for paying off charges incurred at host institution. If you drop or change classes at the host institution, you must notify the Department of Student Financial Aid at LU.

INSTRUCTIONS TO LU OFFICIALS:

The academic advisor, department head, or college dean must sign this form certifying the student named herein is in good academic standing and has permission to take the courses listed at the host institution and the courses are required for the student's degree.

The LU Director of Student Financial Aid must sign this form certifying the student herein has permission to attend the host institution and the LU Department of Student Financial Aid will process financial aid for this student for the term indicated.

The LU Records' Office will conduct Enrollment Reporting to the National Student Loan Data System (NSLDS).

The LU Records' Office will maintain Title IV recordkeeping and reporting requirements.

INSTRUCTIONS TO THE HOST INSTITUTION OFFICIALS:

Please provide total fees and tuition charges for courses listed on this form. Attach a copy of the statement of charges.

Please provide exact dates of enrollment for the semester in which the student plans to be a visiting student.

By signature on this form, you certify the student is enrolled as a visiting student at your institution and no financial aid will be processed for the student.

CONSORTIUM AGREEMENT

Student Name	LU Student ID	Social Security Number
Permanent Mailing Address	City	State
Mailing Address While Attending Host Institution	City	State

CERTIFICATION BY LINCOLN UNIVERSITY

Lincoln University (LU), the home institution and the host institution,

Name of Host Institution

By signature of authorized officials, hereby agree that, upon enrollment of the student named above at the Host Institution for the term and hours recorded below, LU shall administer all financial aid for the student during his/her period of enrollment at the Host Institution, while a degree seeking student at LU. It is further agreed the Host Institution will not process financial aid for the student. The Host Institution agrees to notify LU Department of Student Financial Aid in the event of any change in the student's enrollment status. This agreement can be cancelled upon receipt of written notification by either institution.

This is to certify that the student named above is an () undergraduate () graduate student at LU. He/she has our permission to take the following courses, which are required as part of his/her program at the Host Institution during the enrollment period indicated below and to transfer them back to LU upon completion, to be applied toward his/her degree program.

Course Number	Course Title	Credit Hours	LU Equivalent

Class will transfer to LU () yes () no.

The student () is () is not in good standing.
Class(es) will count toward(s) degree. () yes () no.

Year enrolled at Host Institution:
_____ () FA () SP () SU

Registrar's or
Academic Evaluator's Signature

Academic Advisor's or Equivalent Signature

Financial Aid Officer

Name: (print or type)

Name: (print or type)

Name: (print or type)

****NOTE: IT IS YOUR RESPONSIBILITY TO ACQUIRE THE SIGNATURES OF THE REGISTRAR (B-4 YOUNG HALL) AND YOUR ACADEMIC ADVISOR. THE CONSORTIUM AGREEMENT WILL NOT BE PROCESSED WITHOUT BOTH SIGNATURES.**

SIGNATURE OF AGREEMENT BY HOST INSTITUTION

We agree to the terms stated above. The student named has been admitted at this institution as a visiting student for the courses listed. The total fees for the student for the enrollment period are attached. Enrollment period at Host Institution begins _____ and ends _____.
Number of weeks of instructional time _____.

SIGNATURE of Host Institution Financial Aid Director

NAME (printed or typed)

Financial Aid Office Address

City

State

Zip

Phone

Return Completed Form to:

Lincoln University, Department of Student Financial Aid, 820 Chestnut Street, 103 Young Hall, Jefferson City, MO 65101
or Fax (573) 681-5871.

STUDENT FINANCIAL AID CONSORTIUM AGREEMENT

- In order to receive federal financial aid as a student for the Fall or Spring, I understand all required documents must be submitted and processed by the Department of Student Financial Aid at Lincoln University. This includes:
 - A processed Free Application for Federal Student Aid (FAFSA). If I have not filed a FAFSA or listed LU, I understand processing of my financial aid will be delayed up to 8 weeks.
 - Submitting all documents requested for verification or quality assurance.
 - Submitting loan application and signed loan promissory notes.
 - Submitting all requested material.
 - A processed Consortium Agreement certifying enrollment.
- I understand the Consortium Agreement must be returned to the LU Department of Student Financial Aid on or before the first day of classes. If the Consortium Agreement is not received by the first day of classes at Lincoln University, adjustments will be made, however they may impact time line for refund to be processed, depending on eligibility.
- I am responsible for making sure I am financially enrolled with LU Student Accounts Receivable Office, 105R Young Hall.
- I will keep the LU Department of Student Financial Aid informed of changes to my class schedule (dropping a class or canceling the program), address and/or phone number.
- I understand completion of this consortium agreement does not guarantee enrollment in classes at the host institution. I understand I must meet any course prerequisites demanded by the host institution, even if LU does not require similar prerequisites. I understand it is my responsibility to enroll and make payment in full to the host institution. My financial aid will process and pay towards my account at LU. Any refund will be generated to me.

I have read and understand my responsibilities for the consortium agreement.

Signature

Date