

Cleveland State University Partnership Consortium Agreement

A consortium agreement is a contract between the student, Cleveland State University and the host (visiting) school. This agreement permits the Cleveland State University Financial Aid Office to process student aid based on the combined registered hours at both schools for the semester.

NOTE: Please return this form **no later than 15 business days** prior to the start of the CSU semester for which you are enrolling.

If you are a Partnership student, and are currently signed up for courses through **BOTH** Cleveland State University and Cuyahoga, Lakeland, or Lorain Community College **AND** accepting financial aid, you need to sign a consortium agreement. You need to fill out a consortium agreement EACH semester you take courses at both institutions **AND** have financial aid processed through Cleveland State.

The following information is required to complete the Partnership Consortium Agreement:

Lorain or Lakeland Community College Partnership Students

- Fill out Section I. Remember to print, sign and date the agreement.
- Attach a copy of your community college course schedule for the term.
- In Section II, list the community college courses you are taking for the term.
- Have Lorain or Lakeland's Financial Aid office fill out Section III.
- Drop off your Consortium Agreement to the CSU Partnership Office located on your community campus.

Cuyahoga Community College Partnership Students

(For students with more than 60 Tri-C credit hours earned)

- Fill out Section I. Remember to print, sign and date the agreement.
- Attach a copy of your Tri-C course schedule for the term.
- In Section II, list the Tri-C courses you are taking for the term.
- Have Tri-C's Financial Aid Office fill out Section III.
- Drop off your Consortium Agreement to the Campus 411 Office located in Main Classroom, Room 116 on the main campus of Cleveland State University. For more information, you may contact Campus 411 at (216) 687-5411.

If you are a first-time Federal Stafford Loan borrower at Cleveland State, you must complete loan entrance counseling prior to receiving your first loan disbursement. You must also complete a Master Promissory Note, which can be obtained on-line at: <http://www.csuohio.edu/enrollmentservices/financialaid/>.

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Cuyahoga Community College

Lakeland Community College

Lorain County Community College

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- Please return this form **no later** than 15 business days prior to the start of the CSU semester for which you are enrolling.
- Attach a copy of your community college class schedule for the term and return it to the CSU Lorain or Lakeland Partnership office. Tri-C Partnership students, please return it to the CSU Campus 411 Office (MC 116).

Section I – To be Completed by Student

Student's Name: _____

CSU#: _____ Date of Birth: _____

Student's Address: _____
Street Number City State Zip

Student's Phone Number: _____ Email Address: _____

Under this consortium agreement, I understand:

I must be enrolled in a degree seeking program, be registered for at least six credit hours at CSU to report deferment eligibility to my guarantor / lender and receive campus based awards. This agreement will not be honored after the published drop / add dates. I will be billed. My financial aid will be calculated on the combination of registered hours at both schools. If I am entitled to a refund, the Office of Treasury Services will mail the check to my home address. **It is my responsibility to make payment arrangements with the host school.** I will submit a copy of my semester's grades for this agreement at the end of the term and before any subsequent financial aid is disbursed to my CampusNet account.

Student's Name (please print)

Student's Signature

Date

Section II – To be Completed by Student's CSU Academic Advisor (no exceptions)

Please list the course(s) the student will take at the host school which are transferable to his / her program at CSU

1. _____ 4. _____
2. _____ 5. _____
3. _____ 6. _____

The above course(s) will be acceptable for transfer and will count toward the student's degree requirements at CSU.

Academic Advisor's Name (please print) Academic Advisor's Signature

Academic Department Office Phone Number Date

Section III – To be Completed by the Host School's Financial Aid Office

Under this Consortium Agreement, the Host School agrees not to award any financial aid.

Date of Enrollment: _____ to _____ Term: _____ Hours Registered: _____

Budget: Tuition / Fees: _____ Room / Board (commuter): _____ Books and Supplies: _____
Personal Expenses: _____ Transportation: _____ Other (specify): _____ Total Cost: _____

Financial Aid Officer's Name (please print) & Title Financial Aid Officer's Signature

College or University Address City / State / Zip Code

Telephone Number Date

For further information please contact Campus 411 at 216-687-5411 or visit www.csuohio.edu/partnerships.