



## **Consortium Agreement for Study Abroad**

A consortium agreement is a contract between the student, Cleveland State University and the visiting school. The 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. **Please return this form no later than 15 business days prior to the start of the semester at CSU for which you are enrolling.** You are required to **submit a copy of your grades at the end of this term from the school listed below** before any future financial aid disbursements will occur.

### **I. Student Information & Agreement:**

Under this consortium agreement, I understand: I must be enrolled in a degree-seeking program, be registered for at least six 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 notify the Financial Aid Office of enrollment changes. If a change of enrollment occurs, my aid may be adjusted and 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 check, 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.

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone No.

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Year/Academic Level (Undergraduate, Graduate, Law, etc)

\_\_\_\_\_  
Graduation Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date Signed

*After section one is completed, please submit the form to the Center for International Services and Programs, MC 106.*

### **II. CSU Study Abroad Advisor-Related Information:**

**Term of Study Abroad:**     Fall             Spring             Summer             Year of: \_\_\_\_\_

**Type of Program:**         Independent Study Abroad     Exchange Program     CSU Faculty-led Program

List of Course(s) the Student will take at the host school that are transferable to his/her program at CSU and their CSU equivalent:

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.

\_\_\_\_\_  
Signature of Study Abroad Advisor

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Email Address

*After section one is completed, please submit the form to the Host School's Financial Aid Office.*



## **Consortium Agreement for Study Abroad (Cont.)**

### **II. Host School's Financial Aid Office-Related Information:**

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

Begin/End Dates of Enrollment	Term	Hours Registered
Tuitions/Fees	Room/Board (Commuter)	Books & Supplies
Personal Expenses	Transportation Costs	Other Costs
		Total Cost
Officer's Printed Name & Title	Email Address	Telephone Number
College or University's Name	Street Address	City, State, Postal Code
Signature of Financial Aid Officer		Date Signed

Mail to: Cleveland State University, Financial Aid Office  
2121 Euclid Avenue, Cleveland, OH 44115  
- or - Fax to: 216-687-9247

For In-person inquiry, please visit Campus 411, MC 116.  
<http://www.csuohio.edu/financialaid>  
Phone: 216-687-5411