



Consortium Agreement Instructions

A. What is a Consortium Agreement?

A Consortium Agreement is the application process for a degree seeking student to request approval to receive federal aid from Central Methodist University for a course taken at a host school.

B. What is a host school?

The host school is the institution a student is attending as a non-degree seeking student to complete a class that is applicable to their degree at Central Methodist University. The goal is to have the course transferred back to Central Methodist University and CMU will grant the student his/her degree after all requirements are met.

C. Who pays the host school?

A student is responsible for all payments to the host school. With or without an approved agreement, the student is fully responsible for payment arrangements to the host institution.

D. Who is responsible for disbursing aid and monitoring student eligibility?

Central Methodist University is responsible for calculating awards and disbursing aid to the student. Central Methodist University is also responsible for monitoring satisfactory progress and other student eligibility requirements, record keeping and returning funds if the student withdraws. Financial aid will not disburse until after the add/drop date for the course at the host institution. Students who fail to pay the host institution will not be able to send or receive official transcripts.

E. Why would a Consortium Agreement be denied?

- ❖ Host Information or advisor information is incomplete
- ❖ Do not have enrolled hours at CMU
- ❖ Already full time at the home institution

F. I am planning to attend several courses over different sessions/semesters at the host institution.

Can I use the same form?

The same form cannot be used. The form collects information regarding start date and end date. The courses on a given form should apply to the same session at the same school so that follow-up following the add/drop date can be done for all of the courses.



Visiting Student Consortium Agreement

The purpose of this form is to allow Central Methodist University to disburse federal financial aid to your account based on your combined enrollment at Central Methodist University and the host school. You are not permitted to obtain federal financial aid at both institutions.

What you need to do:

1. Complete **Section A** of this form.
2. Obtain permission from your CMU academic advisor to complete **Section B**.
3. Submit this form to the Host School's Financial Aid Office to complete **Section C**.
4. Submit this completed form along with a copy of your class schedule of the host school to the Central Methodist University Financial Aid Office.

Section A: To be completed by the student:

_____	_____	_____
Student Name	CMU Student ID Number	Social Security Number
_____	_____	_____
Permanent Mailing Address	City	State Zip
_____		Phone
Student E-mail Address		

Hours enrolled at Central Methodist University: _____	Hours enrolled at Host School: _____	

Student Certification:

I agree to:

- Send the completed form (and any attachments) to Central Methodist University by the first day of the consortium term.
- Complete the hours enrolled as indicated on this agreement at the host institution and Central Methodist University.
- Comply with Central Methodist University's and the host school's policies regarding refunds, impact of hour drops and withdraws, Satisfactory Academic Progress, and all other eligibility requirements.
- Pay tuition and fees in a timely manner to both the host school and Central Methodist University. I acknowledge that if tuition and fees are due at the host school prior to financial aid being disbursed to my account at Central Methodist University, it is my responsibility to pay my host school in a timely manner. Financial aid received from Central Methodist University will not be directly transferred to my host school.
- Notify Central Methodist University's financial aid office if I drop or withdraw from any or all of my courses at either school.
- Allow Central Methodist University and the host school to share information related to my enrollment and financial aid eligibility.
- Submit official transcripts from the host school at the end of each session.

I understand that I am solely responsible for paying tuition/fees directly to my host school. Students who fail to pay the host institution will not be able to send or receive official transcripts.

Student Signature

Date

Section B: To be complete by Central Methodist University – Student Academic Advisor

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

This student is in good standing with CMU: **Yes | No** Semester/Academic Year _____

Signature of Student Academic Advisor

Date

Section C: To be completed by Host School

Name of Host Institution

Course Number	Course Title	Semester Credit Hours

Total tuition and fees charged for the courses list above: \$ _____

Other charges by the Host institution are (please describe) \$ _____

As a representative of the Host institution you agree to:

- Confirm the student is in a transient/visiting status at your school taking courses that meet Title IV requirements.
- Not award any federal or state financial aid to the student during the enrollment dates listed above.
- Notify Central Methodist University immediately and supply the effective date(s) if the student withdraws or drops any hours reported in this agreement.
- Upon the student’s request, facilitate the release of an official transcript to Central Methodist University upon completion of the consortium term.

Financial Aid Administrator Signature (Host School)

Date

Email

Phone Number

Section D: To be completed by Central Methodist University – Financial Aid Office

CMU Term COA before the Consortium: _____

Host School’s tuition and fees: _____

Total tuition and fees for term: _____

Central University Financial Aid Administrator Signature

Date

****Note: It is the responsibility of the student to obtain all requisite signatures. The Consortium Agreement will not be processed until all signatures are obtained.**

Office of Financial Assistance – Phone: 660-248-6245 – Fax: 660-248-6288 – Email: finaid@centralmethodist.edu