



## Study Abroad Consortium Agreement

### Instructions

This consortium agreement provides the legal basis required by the federal government for the processing of student and parent federal financial aid programs such as: Pell grants, Direct subsidized and unsubsidized loans, SEOG grants, Perkins loans, parent PLUS loans, state financial aid programs, institutional aid, and other private financial aid sources (scholarships, grants, loans, etc.) for a degree or certificate seeking student who is studying at another college or university (host institution or program provider) on an approved study abroad program.

**Student supporting documents – bring the following to your study abroad office with your Consortium Agreement:**

- The Consortium Agreement
  - Supporting Documents:
    - Copy of the student's completed Prior Approval for Study Abroad Transfer Credit Form
    - Copy of host institution/program provider Acceptance Letter
    - Copy of most current invoice of program costs from host institution/program provider
    - Completed UMass Budget & Financial Aid Planning Form illustrating all costs not on invoice from host institution/program provider (example: airline ticket)
      - Evidence of costs must be attached for each item
    - Host institution/program provider Financial Aid Verification Form (if required by host/program)

### **Student steps:**

1. Complete the Consortium Agreement and submit all supporting documents
  - Section 1 – To be completed by the student.
  - Section 2 - To be completed and signed by the program provider.
  - Section 3 – To be completed and reviewed by Study Abroad advisor.
  - Section 4 – To be completed by your Financial Aid advisor. All supporting documents must be attached. (UMass Dartmouth students will return documents to the Enrollment Center)
2. **Meet all deadlines for submission.** All processing requirements must be completed by:
  - **UMass Boston students:** The last day of the add/drop period for the semester in which the student will be enrolled. Consortium agreements received after this date will not be considered.
  - **UMass Dartmouth/UMass Lowell students:** 30 days prior to departure to ensure that financial aid will be applied on schedule..

### **Need to know:**

- The student's financial aid award will be revised, if necessary, to reflect the student's enrollment at the host institution/program provider.
- Financial aid will be credited to the student's UMass student account. Funds will not be applied until after the add/drop period. **UMass Boston students:** If the semester of the program begins after the add/drop period, the disbursement date will be 10 days prior to the start of the Enrollment Period semester at the host institution.
- Private education loans/alternative loans must be credit approved and certified by the campus before verification will be issued to the provider. This process may take up to 30 days.
- Students must notify the Study Abroad and Financial Aid Office if they withdraw or drop courses at the host institution/program provider. Withdrawn or dropped coursework may impact the student's financial aid status and/or award. Refer to your financial aid office's withdrawal policy for details.
- Some institutions/program providers may require payments prior to the receipt of financial aid. The student is responsible for the host institution/program provider being paid according to their policy.

### **What's Next – Upon turning in your Consortium Agreement & Supporting Documents:**

1. Financial Aid will notify the student via email if the financial aid award changes due to the consortium agreement.
2. Financial Aid will send a copy of the fully completed and signed consortium agreement to the program provider (and student upon request).
3. Once aid is applied, payment will be made to the program provider on behalf of the student as indicated in Section 1 of the Consortium Agreement.
4. After all outstanding charges are paid, if there is a refund due to the student, an email will be sent to the student's UMass email account to indicate when the refund will be available. Students are strongly encouraged to enroll in Direct Deposit.





# Study Abroad Consortium Agreement

## Section 2: To be completed by Program Provider

The program provider agrees not to award the student federal, state or institutional financial aid resources for attendance during the enrollment period listed. The provider agrees to notify the student's home institution, in writing, if the student withdraws from the course(s)/program. At the conclusion of the enrollment, the host/provider agrees to send an official transcript to the student's home institution.

**Note:** Please return with a copy of the program invoice to validate costs listed below.

Student Name: \_\_\_\_\_

Host Institution/Program Provider: \_\_\_\_\_

Enrollment Dates: \_\_\_\_\_ to \_\_\_\_\_  
Begin Date End Date

Total Enrolled Credits: \_\_\_\_\_

Cost of Attendance: Enter amounts student will be billed below in USD. If the student is not billed by your institution/organization for a category below, indicate \$0.

Cost of Attendance	
Tuition and Fees	\$
Program Fee	\$
Health Insurance Fee	\$
Housing	\$
Meals	\$
Books and Supplies	\$
Ground Transportation	\$
Airfare	\$
Passport, Visa Fees	\$
Other Expenses	\$
Total	\$

Please list scholarships, grants, or any other aid to the student.

Provider Awards	
	\$
	\$
	\$

Program Official: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_  
*(Please list address funds should be sent to if student requests)*

Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

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

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



## Study Abroad Consortium Agreement

### **Section 3: To be completed by Home Institution Study Abroad Advisor:**

Verification of Costs of Attendance NOT billed by Program Provider (listed in Section 2 of form).

<b>Cost of Attendance Not Billed by Provider</b>	
Books and Supplies	\$
Ground Transportation	\$
Airfare	\$
Passport, Visa Fees	\$
Other Expenses:	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

The advisor confirms review of the completed Financial Aid packet (sections 1 and 2 above with all attachments).

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

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

### **Section 4: To be completed by Financial Aid Administrator:**

The student's home financial aid office agrees to award and disburse financial aid to the student. The financial aid award will be determined based on the student's enrollment status and cost of attendance expenses. Award is subject to change based on enrollment and tuition/fee charges. Aid will be disbursed to the student account after the add/drop period of the home institution..

Student's home institution:     UMass Boston     UMass Dartmouth     UMass Lowell

Estimated Award Amount: \_\_\_\_\_ Expected Dist. Date: \_\_\_\_\_

Fin. Aid Officer Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

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