

**CONSORTIUM AGREEMENT**  
(For study at another college/program)

This Consortium Agreement will allow you to use some of your federal student aid (Federal Pell Grant, Federal Direct Subsidized and Unsubsidized Loans, Federal Direct PLUS loans), and TAP (if you are a New York resident attending a New York State School full-time) at another approved school or program. Federal regulations allow only one institution, the "home institution," to award federal financial aid. As the "home institution," NYU can recommend these forms of aid when its students study elsewhere, and obtain permission in advance to transfer the courses to the NYU degree program. Academic progress standards for NYU do not change during period of agreement. As the home school, NYU will pay on the Pell Grant of eligible students. Awards are based on the actual cost of attendance at the Consortium School. Please note that this agreement cannot be used for campus-based or NYU aid programs.

This form may be used for courses approved to be taken elsewhere, provided you have the form completed by the Consortium School/Program. As with most forms of aid, you must also file a Free Application for Federal Student Aid (FAFSA) using NYU's Federal School Code of 002785 and meet any published deadline dates.

Transfer of Funds:

New York University will transfer any excess funds directly to the Consortium School once your financial aid has been disbursed to your NYU student account. By signing this consortium agreement, you are agreeing to authorize the Consortium School to release any enrollment and tuition-related information to New York University for the period of enrollment covered by this agreement.

**DIRECTIONS:**

1. Complete Section A of the agreement. Be sure to sign.
2. Have your NYU advisor\* complete Section B of the agreement stating that permission has been granted and credits will transfer as equivalent to NYU credit. Grades achieved at a visiting school will not necessarily be averaged into the student's NYU GPA.
3. Have Consortium School complete Section C of Agreement and return to New York University, Office of Financial Aid via the contact information at the bottom (pg. 4) of this form.

\*Gallatin undergraduate students should submit this form to the Assistant Dean for Global Programs for the advisor's signature.

**CONSORTIUM AGREEMENT BETWEEN**

|   |
|---|
| New York University<br><i>Home School</i> |
|---|

and

|                             |
|-----------------------------|
| <br><i>Host School Name</i> |
|-----------------------------|

**SECTION A: TO BE COMPLETED BY STUDENT**

1. Student Name: \_\_\_\_\_ UID: N \_\_\_\_\_
2. Permanent Address: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Email Address: \_\_\_\_\_
4. Address Away: \_\_\_\_\_
5. I will be in the following non-NYU program: \_\_\_\_\_  
 2019-2020 Academic Year     2019 Fall Semester Only     2020 Spring Semester Only     2020 Summer Session(s) Only
6. This agreement applies to:  
 Federal Direct Subsidized/Unsubsidized Loan     Federal Pell Grant     Other (name) : \_\_\_\_\_
7. Do you receive financial aid from non-NYU sources?     Yes     No  
If yes, please specify sources and amounts: \_\_\_\_\_  
\_\_\_\_\_
8. List the approved course(s) that you are taking at the Host School which are applicable to your academic program at NYU:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STUDENT CERTIFICATION**

Under this consortium agreement, the student agrees to:

1. Be enrolled in a degree, certificate, or other recognized credential program at New York University (NYU).
2. Maintain satisfactory academic progress.
3. Take courses at the Host School which are transferable to his or her NYU degree.
4. Notify the NYU Office of Financial Aid within two (2) business days if he or she does not begin attendance in the courses listed and approved in this consortium agreement.
5. Immediately inform the NYU Office of Financial Aid and the Host School of any change in enrollment status, including withdrawing from all courses or substitution of approved courses.
6. Ensure that the Host School provides the NYU Office of the Registrar with a Host School academic transcript within fourteen (14) calendar days of the completion of the consortium period.
7. File a FAFSA and complete the required financial aid process prior to all applicable deadlines.
8. Pay tuition, fees, and other expenses as charged by NYU and/or the Host School on/prior to all posted due dates as outlined by each college.

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

*NOTE: Electronic signatures are not accepted.*

**SECTION B: TO BE COMPLETED BY NYU ADVISOR\***

\*Gallatin undergraduate students should submit this form to the Assistant Dean for Global Programs for the advisor's signature.

1. List the approved course(s) that the student is taking at the Host School which are applicable to his or her academic program at NYU:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. The number of credit hours the student is taking at the Host School is: \_\_\_\_\_

3. The number of credit hours the student is taking at NYU is: \_\_\_\_\_

4. The TOTAL enrollment status (NYU + Host School) for the Consortium period is.       Full Time       Three-Quarter Time       Half Time       Less Than Half Time  
12+ credits      9-11 credits      6-8 credits      1-5 credits

**NYU ADVISOR CERTIFICATION**

Under this consortium agreement, New York University (NYU):

1. Certifies that the student is enrolled in a degree, certificate, or recognized credential at NYU.
2. Agrees to accept the course work listed above toward the completion of the student's degree, certificate, or other recognized credential requirements.

**Advisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Ext:** \_\_\_\_\_

*NOTE: Electronic signatures are not accepted.*

**Advisor Email:** \_\_\_\_\_ **Academic Department:** \_\_\_\_\_

**SECTION C: TO BE COMPLETED BY THE HOST SCHOOL OFFICE OF FINANCIAL AID**

1. Name of the U.S. College/University that will receive federal funds: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Program Director/Title: \_\_\_\_\_

4. Telephone Number: \_\_\_\_\_

5. Is your College/University approved by the U.S Department of Education to receive Title IV Federal Funds?

Yes Please list your title IV code: \_\_\_\_\_  No (If no, student should contact the NYU Financial Aid Office)

6. Enrollment Status:     Less than Half -Time     Half-Time     Three-Quarter Time     Full-Time

Fall 2019 credits \_\_\_\_\_ Fall 2019 Enrollment Period Dates \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Spring 2020 credits \_\_\_\_\_ Spring 2020 Enrollment Period Dates \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Summer 2020 credits \_\_\_\_\_ Summer 2020 Enrollment Period Dates \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

7. Estimated Costs:                      *Fall 2019 Amount*                      *Spring 2020 Amount*                      *Summer 2020 Amount*

Tuition                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Fees                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Room & Board                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Books & Expenses                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Travel                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Other                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

**TOTAL**                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

OVER (continued on pg. 4)

8. Is your program providing this student with any financial aid?  Yes  No

If yes, describe and provide amounts: \_\_\_\_\_

9. Contact Information for Host School Point of Payment:

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

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

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

**HOST SCHOOL CERTIFICATION**

Under this consortium agreement, the Host School:

1. Certifies that the student listed has been accepted for enrollment in an academic program that meets the Title IV student financial aid eligibility requirements.
2. Will make available applicable student consumer information required under Title IV.
3. Will provide the NYU Office of Financial Aid with documentation of the student's enrollment at the Host School.
4. Agrees to notify the NYU Office of Financial Aid if the student fails to enroll in, or withdraws from, the Host School (to include the withdrawal date and other relevant information).
5. Will provide the NYU Office of the Registrar with an academic transcript upon completion of the consortium period.

**Signatures:** (Please note: Federal Regulations permit the signatures of Financial Aid Officers.) I certify that the above information is true and complete and that I will notify NYU if any of this information changes.

**Host School Financial Aid Officer Signature:** \_\_\_\_\_

*NOTE: Electronic signatures are not accepted.*

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**SECTION D: TO BE COMPLETED BY NYU OFFICE OF FINANCIAL AID**

**NYU OFFICE OF FINANCIAL AID CERTIFICATION**

Under this consortium agreement, New York University (NYU):

1. Agrees to process the student's Title IV financial aid application and provide payment of Title IV funds (if eligible) as appropriate for the consortium period.
2. Will make available applicable student consumer information required under Title IV.
3. Certified that the student is making satisfactory academic progress toward the completion of his or her degree, certificate, or recognized credential at the Home School.
4. Will conduct Enrollment Reporting to the National Student Loan Data System (NSLDS).
5. Will calculate returns of Title IV funds, when appropriate.
6. Will maintain Title IV recordkeeping and reporting requirements.

**NYU Office of Financial Aid Financial Aid Officer's Signature:** \_\_\_\_\_

*NOTE: Electronic signatures are not accepted.*

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

| <b>Please submit this form (include your University I.D. number on all pages) by one of the following:</b>   |   |  |
|--|---|--|
| <b>MAIL/IN PERSON</b>  | <b>FAX</b>  | <b>SCAN/EMAIL</b>  |
| NYU StudentLink Center – Office of Financial Aid<br>383 Lafayette Street, 1 <sup>st</sup> Floor, New York, NY 10003<br><b>Attn: Consortium Agreement</b> | 212-995-4661<br><b>Attn: Consortium Agreement</b> | financial.aid@nyu.edu<br><b>Attn: Consortium Agreement</b> |
| Tandon School of Engineering StudentLink Center<br>5 Metrotech Center, Dibner Hall, Room 201, Brooklyn, NY 11201<br><b>Attn: Consortium Agreement</b>    |   |  |