The University of Toledo, College of Law
Consortium Agreement

A consortium agreement enables you to receive financial aid while concurrently enrolled for courses at The University of Toledo (home institution) and another institution (host institution). This allows your eligibility for financial assistance to be based on the total credits attempted at both institutions for the semester or term (excluding summer). A new consortium agreement must be completed each semester. If approved for consortium, the maximum number of terms allowed is three terms/times.

Deadline:

✓ Agreements must be received by the Law Financial Aid Office no later than one week prior to the UT Term start date for the appropriate semester.
✓ Allow time for the consortium agreement to be processed. It could take up to 2 weeks for the consortium to be completed by the UT Financial Aid Office.

Application Procedures:

✓ A processed and complete Free Application for Federal Student Aid (FAFSA) for the appropriate aid year must be on file at The University of Toledo (UT) prior to submission of the signed and complete consortium agreement.
✓ Meet with UT Law Associate Dean to verify classes from Host Institution will be accepted and satisfy degree requirements at UT. The course(s) being funded by Financial Aid must be required by your program of study.
✓ Complete Part I. Read and sign the Student Certification.
✓ Submit the Consortium Agreement with Part I completed and Student Certification signed to the Law Financial Aid Office.

Consortium Agreement Restrictions:

✓ Both UT and the host institution reserve the right not to participate in a consortium agreement for any reason.
✓ The consortium process (home or host status) is limited to no more than three terms/times.

Disbursement of Financial Aid:

Financial aid will authorize to disburse only after evaluation of credit hours attending is accurately determined. It is your responsibility to arrange for payment at the host institution, including tuition, fees, and books until funds can be disbursed to you. You must follow regular payment procedures at both institutions to ensure that your fees and bills are paid by the required deadline dates.

Student Requirements:

✓ You must be concurrently enrolled at UT (at least one credit) and the Host institution to be eligible for financial assistance with the exception of summer.
✓ You must notify the UT Law Financial Aid Office of any changes in your enrollment status at the host institution immediately. In the event of non-attendance or withdrawal from any or all classes, you will be responsible for repayment of financial aid received according to applicable federal and institutional regulations.
✓ All consortium credit hours submitted for consideration must be accepted and satisfy degree requirements at UT. Meet with the UT Law Associate Dean for assistance.
✓ Credits earned at the host institution must be transferred to UT within 15 days after the end of the semester. You must request an official transcript be sent to the UT Law Registrar’s office. Financial aid for subsequent periods of enrollment will be on hold until transfer of credits can be verified.

Satisfactory Progress: Credits taken at both institutions will be used to determine your Financial Aid Satisfactory Academic Progress (SAP) as an aid recipient at UT. Please review the “SAP Test and Fact Sheet” on your MyUT Portal under the Law Channel or on the Law Financial Aid website at http://www.utoledo.edu/financialaid/forms.html. Zero credits earned for the term will result in immediate suspension and/or cancellation of aid for future terms.
Please make a copy of this consortium agreement for your records.

Consortium Agreement Part I
TO BE COMPLETED/SIGNED BY STUDENT
The purpose of this consortium agreement is to enable enrolled students at UT to participate in financial aid programs while concurrently attending another institution (host institution) and UT (home institution). UT will be the home institution providing financial assistance.

Student Name ___________________________ UT Rocket Number: R__________

(First) (Last) (MI)

Student Address ___________________________________________________________________________

City __________________ State ______ ZIP ______

Student Phone Number: ____________________________ Student’s Major/Program: ____________________________

Semester and Year of Attendance: ___________ Date Semester Begins: ___________ Date Semester Ends: ___________

Host Institution: ____________________________ Number of credit hours to be taken at Host Institution: ____________

Number of Credit Hours to be taken at UT for same semester: ____________

Registered Courses at Host Institution

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<tr>
<th>Host Subject &amp; Course Prefix Number</th>
<th>Course Title/Name</th>
<th>Credit Hours</th>
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Student Certification: Please certify that you have read and understand the statements below:

✓ I am asking UT to include my enrollment hours at my host institution for federal financial aid. I may only apply for financial aid at one institution.
✓ I am enrolled in a degree seeking program at UT and agree to only enroll in courses that are transferable and/or applicable to my degree program. I understand that I am required to meet with the Associate Dean to confirm that all courses taken at the host institution will transfer and are applicable to my law degree program.
✓ I understand that I will receive financial aid from UT and all financial aid records for this period will be maintained at the UT Financial Aid office.
✓ I understand that financial aid will be credited to my student account at UT and will be used first for UT tuition and required fees. Eligible refundable aid programs that create an excess aid balance will be refunded to student. Financial aid will be authorized to disburse only after evaluation of credit hours attending is accurately determined. The financial aid award year at UT begins with summer and ends the following spring semester.
✓ I understand I am responsible to pay the Host Institution for any balance owed and am subject to their payment timetable.
✓ I will notify the UT Law Financial Aid office immediately of any changes in enrollment status at either institution.
✓ I will request official transcripts from the Host Institution be sent to UT Law Registrar’s office within 15 days after the date the semester ends. I understand if this is not done all future financial aid at UT will be suspended and/or cancelled.

I authorize the host and home institutions to release enrollment, financial, and academic information to the Financial Aid and Registrar Offices. This release also applies to other offices on a “need to know” basis. I certify that I have read and understand the procedures and requirements of the consortium agreement. I agree to comply with these procedures, and understand that noncompliance will result in a loss of financial aid.

Student Signature_________________________________________________________Date: __________________

Please Return to: The University of Toledo, College of Law, Room 2000R, 2801 W Bancroft St, Mail Stop 507, Toledo, OH 43606
Phone 419-530-7929 Fax: 419-530-5091 Email: robin.zubke@utoledo.edu
Consortium Agreement Part II
TO BE COMPLETED/SIGNED BY THE HOST INSTITUTION’S FINANCIAL AID OFFICE

Name of Host Institution: ___________________________ Semester ____________

Enrollment Dates: From __________ To ___________ Number of Credits Student Registered for: __________

Total Cost of Attendance $___________ Tuition/Fees $___________ Books/Supplies $___________ Room/Board $___________

Transportation $___________ Personal/Misc. $___________ Other $___________

Under this Agreement, The Host Institution Agrees to:
• Not award any financial aid to the student in this agreement.
• Provide UT with documentation of the student’s enrollment at your school and student’s charges for enrollment.
• Notify UT if the student fails to enroll or withdraws from the host school.
• This signed agreement acts as a release form for any academic, financial aid, transcript related, or balance related information on this student. Furthermore, your signature verifies that the student is registered for the classes listed on Part I of this agreement and all information above is accurate.

Host Institution Financial Aid Signature ___________________________ Date ____________ Telephone Number ____________

Printed Name and Title ___________________________ Email Address __________________ Fax Number ____________

Consortium Agreement Part III
TO BE COMPLETED BY UNIVERSITY OF TOLEDO ASSOCIATE DEAN

A consortium agreement enables the student to receive financial aid while concurrently enrolled for courses at UT (home institution) and another institution (host institution). Summer does not require concurrent enrollment. Eligibility for financial assistance is based on the total credits attempted at both institutions for the semester or term provided the course work is applicable to the students major.

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<tr>
<th>UT Course and Prefix Number</th>
<th>Course Title</th>
<th>Program Usage</th>
<th>Credit Hours</th>
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*(S)ubstitution, (E)quivalent, (R)equired elective

I have reviewed the course of study and the above courses will be acceptable for transfer and will count toward the student’s degree requirements at UT College of Law.

ASSOCIATE DEAN:
Signature: ___________________________ Department: ___________________________

Printed Name: ___________________________ Office Phone __________________________ Date ____________

HOME SCHOOL FINANCIAL AID CERTIFICATION:
Financial Aid Signature: ___________________________ Students Total Credits __________________________ Date ____________

Student’s Program of Study: ____________________________________________

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