



Consortium Agreement
(For study at another college/program)
2012-13 Academic Year

This Consortium Agreement will allow you to use some of your federal student aid (Stafford, Unsubsidized Stafford, and PLUS loans,) at another approved school or program. Federal regulations allow only one institution, the "home institution" to award federal financial aid. As the "home institution," HUC can recommend these forms of aid when its students study elsewhere, and obtain permission in advance to transfer courses to the HUC degree program. Academic progress standards for HUC do not change during the period of agreement. HUC will maintain all records related to the student's aid. Awards are based on the actual cost of tuition and fees at the Consortium School and HUC's cost of attendance for the appropriate program.

This form may be used for courses to be taken elsewhere, provided you have the form completed by the Consortium School/Program. As with most forms of aid, you also file a Free Application for Federal Student Aid (FAFSA) .

- Directions:**
1. Complete Section A of Agreement. Be sure to sign.
 2. Obtain signature from advisor stating that permission has been granted and credits will transfer as equivalent to HUC credit. Grades achieved at a visiting school will not necessarily be averaged in the student's HUC GPA.
 3. Have Consortium School complete Section B of Agreement and return to Hebrew Union College, Office of Financial Aid
1 West 4th Street, New York, NY 10012 or fax to (212) 358-7752

Section A: TO BE COMPLETED BY STUDENT AND FORWARDED TO NON-HUC PROGRAM

1. Student Name: _____
2. Permanent Address: _____ Telephone: _____
3. I will be in the following HUC program: _____

- 2012-2013 Academic Year
- 2012 Summer Session Only
- 2012 Fall Semester Only
- 2013 Spring Semester Only

4. This agreement applies to:
 - Stafford and Grad PLUS Loans
 - Other (name): _____

5. Any financial aid from non HUC sources? Yes No

If yes, please specify sources and amounts:

6. The above student has permission to attend. The credits at the other school may be given credit as if earned at HUC.

Advisor's Signature: _____ **Date:** _____ **Ext:** _____

Student's Signature: _____ **Date:** _____

PG. 2 –

SECTION B: TO BE COMPLETED BY THE CONSORTIUM SCHOOL

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

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

Yes No (If no, student should contact the HUC Financial Aid Office)

3. Address: _____

4. Program Director/Title: _____

5. Telephone Number: (____) _____

6. Enrolment Status:

- Less than half time
- Half-time
- Three-quarter time
- Full-time

7. Estimated Costs: Tuition & Fees _____
 Room & Board _____
 Books & Expenses _____
 Travel _____
 Other _____
 Total _____

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

If yes, describe and provide amounts: _____

Certification:

A. The Consortium School certifies that the student listed has been accepted for enrollment in the program listed above (#1) and that the program meets the federal requirement for aid. The program is at least 15 weeks in length, and the academic year is 30 weeks in length.

B. The Consortium School agrees not to pay the student campus based funds or process any federal loans during the enrollment period listed above (#5). Further, the Consortium School agrees to notify HUC if the student changes his or her enrollment status, or withdraws from the program before its conclusion. If the student withdraws the Consortium School must provide the withdrawal date and dates of academic semester as soon as the withdrawal date is determined. The home school will be responsible for R2T4 determination and appropriate return of funds. Satisfactory conclusion of the program will be evidenced by an academic transcript upon written request of the student, but the Consortium School agrees to notify HUC of any satisfactory progress or attendance problem.

C. HUC agrees to provide payment to the student, if eligible, under federal programs for the appropriate period.

D. The Consortium School agrees to notify HUC if the student is not attending classes regularly.

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 HUC if any of this information changes.

| | |
|---|---------------------------|
| For Hebrew Union College - Jewish Institute of Religion | For the Consortium School |
| Print Name and Title | Print Name and Title |
| Date | Date |

Please Return To: Office of Financial Aid or Fax: (212) 358-7752
 Roseanne Ackerley
 1 West 4th Street
 New York, NY 10012