

**CONSORTIUM AGREEMENT  
BETWEEN  
EAST STROUDSBURG UNIVERSITY (ESU)  
AND**

<b>Name of Host School</b>	<b>Title IV School Code</b>

This consortium agreement entered into by the East Stroudsburg University (home institution) and the host school listed above is for the purpose of allowing matriculated students at East Stroudsburg University to receive financial aid based on their enrollment at the host school during the effective date of this agreement.

<b>Effective date covered by this Agreement is:</b>	<b>To</b>
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East Stroudsburg University and the school named above are entering into a consortium agreement for:

<b>Name of Student</b>	<b>Student ID Number</b>	<b>Telephone Number</b>

**East Stroudsburg University (Home Institution) agrees to:**

- Calculate and disburse all institution, state and Title IV aid the student is eligible to receive.
- Monitor the reporting of enrollment information to the National Student Clearinghouse.

**The Host School agrees to:**

- Provide East Stroudsburg University with the actual tuition, fees, room and board charges the student will incur at their institution.
- Verify the student's enrollment status for the payment period covered by this agreement. **The host institution must notify East Stroudsburg University immediately in writing of any changes to the student's enrollment.**
- **Not** disburse any state or Title IV aid for the above student.

**The Student agrees to:**

- Enroll in courses at the host school that are transferable to ESU.
- Maintain satisfactory academic progress as set forth by the guidelines of the ESU satisfactory academic progress policy.
- Have the academic advisor/program coordinator at ESU assist with completing this agreement to verify the courses approved is applicable to their program of study at the home institution.
- Submit this completed form with a copy of their registration form from the host school to the Registrar in Enrollment Services.
- Pay the balance of tuition and fees to the host school. If the student has no current balance at East Stroudsburg University, aid will be disbursed to the student and it is the student's responsibility to pay the host school.
- Upon completion of the semester, submit an official copy of their academic transcript to the Enrollment Services at East Stroudsburg University.

**TO BE COMPLETED BY THE STUDENT'S ACADEMIC ADVISOR OR  
PROGRAM COORDINATOR AT ESU**

How many credits is the student taking at the Host school which is applicable to their program at ESU? \_\_\_\_\_

Please list the course(s) the student is taking at the Host school, which are applicable to their program at ESU:



\_\_\_\_\_  
Advisor's/Program Coordinator Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Academic Department

\_\_\_\_\_  
Telephone #

**TO BE COMPLETED BY FINANCIAL AID  
AT THE HOST INSTITUTION**

Status of Student: (check appropriate enrollment status)

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

Housing Status:      Dormitory \_\_\_\_\_      Off-Campus \_\_\_\_\_      Commuter \_\_\_\_\_

Please complete the following using **your** student budget for the period of enrollment listed above:

**STUDENT BUDGET**

Tuition & Fees	\$ _____
Room & Board	\$ _____
Books & Supplies	\$ _____
Transportation	\$ _____
Personal, Misc.	\$ _____
<b>Total</b>	\$ _____

Beginning Date of Enrollment Period: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year

Ending Date of Enrollment Period: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year

\_\_\_\_\_  
Financial Aid Administrator's Signature

\_\_\_\_\_  
Name of Host Institution

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Date

Return this form to:

Student Enrollment Center  
Records and Registration/Zimbar Hall  
East Stroudsburg University  
200 Prospect Street  
East Stroudsburg, PA 18301-2999  
Fax: 570-422-2850