

Vincennes University Consortium Agreement

Information and Instructions

If you are getting your degree and financial aid through Vincennes University, it may be possible to count the credits you are taking at another institution during the same semester as part of your enrollment status at VU for financial aid purposes. For example, if you are taking nine credits at VU and three credits at another school, we may be able to count those three credits so that you are full time instead of three quarter time. This would allow you to receive a full Pell grant instead of a partial Pell grant for the semester.

The courses you are taking at the other school, called the host school, must be able to be transferred back to VU to meet your degree requirements here. **Before you start completing this form**, check with your academic advisor to see whether the courses at the host school will be accepted in transfer to meet degree requirement here. If they will, you should complete the following five steps.

Complete **Step 1** of this consortium agreement form so that we know who the other school is, how many credits you are taking there, and how to contact you if we have questions.

Step 2: Read this section to see what you are committing yourself to and what information you are agreeing to allow the other school to share with us. Then if you understand and agree, provide your signature.

Step 3: Take the form to your academic advisor who, along with the dean of the college your degree is in, will provide their signatures to show that if you successfully complete the courses at the other school, the credits will transfer back to VU and count toward your degree.

Step 4: This section of the form must be completed by the financial aid office of the host school. This lets us know if there are any extraordinary course fees or other costs associated with your taking their courses.

Step 5: Submit the completed form to VU's student financial services office for our review and processing. We recommend that you submit the form yourself, but if all the steps listed above are complete, you can ask the financial aid office of the other school to fax the form directly to us at 812-888-4261 or by e-mail attachment to fa@vinu.edu.

If everything is in order, we will count the credits you are taking at the other school as part of your enrollment status at VU for financial aid purposes. If this makes a difference in your financial aid award, you will receive an e-mail directing you to check your VUX account to see what the change is.

Do not submit the consortium agreement form until you have made sure that all five steps are completed.

VINCENNES UNIVERSITY
Financial Aid Consortium Agreement

Step 1. Please print.

Student: _____ ID# _____

Student's Address: _____
City State ZIP

Phone number _____ E-mail _____

Host school _____

Enrollment period at host school starts _____ and ends _____.
Mo/Day/Yr Mo/Day/Yr

Table with 3 columns: Host school course code & number, Name of course, Credits. Includes three rows of blank lines for entry.

Step 2. Student affirmations.

- 1. I am a degree-seeking student at Vincennes University (VU).
2. I give permission for the host school to release my host school academic transcript directly to VU for purposes of transferring the pre-approved consortium credit hours to VU.
3. I understand that the transferred credit hours will not affect my GPA at VU, but they will affect my completion rate and my status on the maximum timeframe standard of satisfactory academic progress (SAP).
4. I understand I am responsible for the payment of any and all educational costs incurred at the host school as a result of my enrollment there.
5. I understand that if I drop courses or withdraw completely from either VU or the host school during the term specified, I could be required to repay grants and student loans disbursed through VU as a result of this consortium agreement.
6. I understand that if my financial aid award is affected by the credits I take under this consortium agreement, I will receive notification of the change through my preferred e-mail to check my awards on VUX.
7. I understand that if I ask the host school to send this completed form directly to VU's student financial services office, it is my responsibility to check that the student financial services office has received the completed form.

I have read, understand, and agree to the above.

Student's Signature: _____ Date: _____

Step 3. VU academic advisor and college dean confirmations.

By signing below we confirm that if the student earns at least a grade of C in the courses identified in Step 1, we will accept transfer of those course credits from the host school to meet the student’s degree requirements at Vincennes University.

_____	_____
Academic advisor signature	Date
_____	_____
College dean signature	Date

Step 4. To be completed by the HOST school.

Number of credit hours from Step 1: _____

Tuition/Fees: \$ _____

Books/Supplies: \$ _____

Room/Board: \$ _____

Vincennes University (VU) and the HOST school agree to the following:

1. VU is the degree-granting institution for the student identified in Step 1 and is the HOME institution for ALL financial aid matters
2. VU will provide financial aid disbursements for the student as appropriate under Title IV guidelines for the term specified above.
3. VU will accept transfer credits from the HOST school for the courses identified in Step 1 in which the student earns a grade of “C” or above. Grades earned at the HOST school will not be averaged into the student’s grade point average at VU.
4. VU will monitor satisfactory academic progress using all courses taken at both VU and the HOST school.
5. The HOST school agrees not to provide financial aid for the student during the specified consortium term with the exception of outside scholarships or institutional fee waivers with the prior notification to VU.
6. The HOST school agrees to notify VU of any change in the enrollment status of the student during the specified consortium term.
7. The HOST school agrees to release the academic transcript of the student reflecting the consortium courses directly to VU at the close of the specified consortium term. The student has agreed to check whether the HOST school requires a transcript request form near the end of the term.

_____	_____	_____	
Signature of host school financial aid administrator	Title	Date	
_____	_____	_____	_____
Street address	City	State	ZIP
_____	_____		
Telephone	E-mail Address		

Approved

_____	_____	_____
Signature of VU financial aid administrator	Title	Date