



Federal Aid Consortium Agreement – 2011/12 Academic Year

I. Student Information: (to be completed by the student requesting the consortium)

_____ XXX-XX-
LAST NAME FIRST NAME M.I. LAST 4 DIGITS OF YOUR SOCIAL SECURITY NUMBER

BSU ID# (IF KNOWN) CSI/CWI ID# (IF KNOWN) E-MAIL ADDRESS PHONE NUMBER

II. HOME Institution (Please select only one "Home Institution")

"Home Institution" - The institution where you are currently seeking a degree and from which you will to receive federal financial aid.

- Boise State University
 College of Southern Idaho
 College of Western Idaho

III. HOST Institution (Cannot be the same as the HOME Institution selected above)

"Host Institution" - The institution(s) where you are taking courses to apply towards the degree being sought at the HOME institution.

- Boise State University
 College of Southern Idaho
 College of Western Idaho

IV. Specify the semester you are applying for:

- Fall Semester 2011 (Deadline November 1, 2011)
 Spring Semester 2012 (Deadline April 1, 2012)
 Summer Term 2012 (Deadline June 1, 2012)

V. Student Certification: By signing this agreement, I understand that:

- ✓ I must complete the financial aid application process at my HOME institution including submitting ALL other documentation and other information requested BEFORE this consortium can be approved;
- ✓ I agree to allow the institutions indicated above to share information about me regarding registration, transcripts, and financial aid;
- ✓ I must be enrolled in at least three (3) credits at the HOME institution to be eligible to participate in this consortium;
- ✓ Courses taken at the HOST institution(s) must apply towards my stated degree intent at my HOME institution;
- ✓ Remedial courses taken at the HOST institution cannot be included in a consortium agreement;
- ✓ My eligibility for federal financial aid at my HOME institution is based on the approved courses for this agreement, and these courses will not count towards determining institutional aid eligibility;
- ✓ My HOME institution cannot be BSU if I have **earned 70 or more combined credits** at CSI and CWI.
- ✓ I agree to IMMEDIATELY inform the financial aid office at the HOME institution of ANY change in enrollment at my HOST institution, as my eligibility for federal financial aid may be impacted and I may owe a repayment of previously disbursed financial aid;
- ✓ If I drop all my classes or completely withdraw, I understand that I may be required to repay financial aid balances to both the HOME and the HOST institutions;
- ✓ I am only eligible to receive federal financial aid from the HOME institution;
- ✓ I am asking the HOME institution to pay federal financial aid to me for courses that I agree to complete at both the HOME and HOST institution(s);
- ✓ Financial aid will be disbursed to my student account at the HOME institution. It is my responsibility to pay any remaining charges at the HOME institution AND to make tuition and fee payment at the HOST institution;
- ✓ I am required to notify the HOME institution of any other sources of financial assistance (scholarships, tuition waivers, etc.) I am receiving from the HOST institution;
- ✓ I understand the satisfactory academic progress standards at my HOME institution will be used when determining my initial and continued eligibility for federal financial aid; **I cannot be on SAP probation or conditions if BSU is my home institution.**
- ✓ This consortium, if approved, is valid only for the term indicated.

STUDENT SIGNATURE

DATE

