



BOWLING GREEN STATE UNIVERSITY  
Student Financial Aid and Scholarships

## CONSORTIUM AGREEMENT FORM 2024-2025

### Terms and Conditions

In order to receive federal financial aid for the course(s) taken at a host institution; under a consortium agreement, the following terms and conditions must be met.

1. **The student must, *initial next to the terms.***

- ☐ Be enrolled in a degree, certificate, or recognized credential program at BGSU
  - (Students in eCampus or Distance Campus programs do **not** qualify)
- ☐ Be meeting Satisfactory Academic Progress
- ☐ Be maintaining a 2.0 CGPA or higher
- ☐ Enroll in at least 6 credit hours at BGSU during the consortium enrollment period
  - \*Exceptions:
    - Graduate students must enroll in a minimum 4 BGSU credit hours
    - Co-operative Education students are not required to enroll in additional courses beyond required co-operative education course registration
    - Summer students are not required to enroll in BGSU courses as long as all other criteria have been met
    - SFA Director approval of specific program/coursework
- ☐ Have earned a passing letter grade (A, B, C, D) in a minimum of 12 BGSU credit hours
- ☐ Not exceed 3 semester limit of consortium agreements
- ☐ Have a valid 2024-2025 FAFSA on file with BGSU Student Financial Aid Office (SFA)
- ☐ Not owe a past due balance in student account

2. **If the student meets the above criteria, the student must,**

- Complete sections A and B, , obtain the required signatures for sections C and D, and submit this form to BGSU SFA by the listed deadlines.

**DEADLINE FOR SUBMISSION:**

Summer Semester – June 26, 2024

Fall Semester – September 5, 2024

Spring Semester – January 22, 2025

NOTE: Financial aid disbursements will be delayed until ***all*** sections have been received in SFA. **Completed forms may be uploaded at: <http://sfa.bgsu.edu/upload> or faxed to: (419) 372 – 0404.**

- Attach a copy of their schedule from the Host Institution to this document,
- Notify BGSU SFA of any changes in enrollment at either the Host Institution and/or BGSU. This includes failure to begin a course, drop, or withdraw from any of the approved courses under this agreement.
- Inform BGSU SFA and Registration & Records Offices if there is a substitution for any course approved under this agreement.
- Pay all tuition, fees, and other expenses as charged by BGSU or the Host Institution. This includes making payment arrangements with both schools until financial aid is made available.
- Provide BGSU SFA with a copy of their final transcript or grade report from the host school upon completion of the semester; but ***no more than 14 days*** after the end of the semester covered by this agreement. Failure to do so will result in the removal of all awarded financial aid under this agreement. The student will be required to return any funds awarded and may be denied approval to participate in any future consortium agreements.
- Send Official Transcript from Host Institution to BGSU to transfer the class to their BGSU degree program.



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### Section A: Student Contact and Course of Study Information

Student Name (Last, First, MI)			Phone
Name of Host Institution:			
Host School ID #	# Credit Hours enrolled at Host Institution:	# Credit Hours enrolled at BGSU:	BGSU ID #
Term of enrollment: <input type="checkbox"/> Summer 2024 <input type="checkbox"/> Fall 2024 <input type="checkbox"/> Spring 2025			
Host Institution Course Number and Name	Credit Hours	BGSU Course Equivalency	Credit Hours

### Section B: Student Certification and Signature

By signing below, I certify that I will abide by the terms and conditions of this consortium agreement and understand my financial aid eligibility will be adjusted accordingly based on my enrollment at both BGSU and the Host Institution. I further understand that I am responsible for notifying BGSU of any enrollment changes as well as for paying my tuition and fees by the due date(s) at each institution regardless of the status of this agreement. **MUST BE A WET SIGNATURE - Electronic signatures will not be accept.**

Student Signature	Date
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### Section C: BGSU Academic Advisor Certification

By signing below, I certify that I have reviewed the course(s) of study for the student named above and confirm that the Host institution's course(s) are required for and will be applied toward the student's degree, certificate, or other recognized credential program.

Academic Advisor Name (Please Print)	College/Department
Academic Advisor Signature	Date

### Section D: Host Institution Financial Aid Certification

By signing below, I certify that I have reviewed the course of study for the student named above and confirm that they have enrollment at our institution. In addition, we will NOT process financial aid for this student and agree to share information about this student's enrollment as requested by BGSU Student Financial Aid.

Credit Hours Enrolled	Semester <input type="checkbox"/> Quarter <input type="checkbox"/>	Enrollment Period (Dates) To	Host School Tuition & Fees \$
Financial Aid Office Staff Name (Please Print)		Phone Number	Email Address
Financial Aid Office Staff Signature & Title			Date