



**CONSORTIUM AGREEMENT**

**To Be Completed By The Student:**

Student's Name \_\_\_\_\_ Student ID # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Permanent Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Home School**

The University of Chicago

Please complete and return to address above.

**Host School:** \_\_\_\_\_

The student listed above is a candidate for a \_\_\_\_\_ degree at The University of Chicago. However, the student will attend the host institution, listed above, as a transient student during the indicated term(s):  Summer \_\_\_\_  Autumn \_\_\_\_  Winter \_\_\_\_  Spring \_\_\_\_  
The student above has permission to attend the host institution. The credits earned at the other school will count towards the students' degree at the University of Chicago.

Dean of Students Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**To Be Completed By The Financial Aid Office At The Host Institution:**

The student above has requested Federal Loan assistance at the University of Chicago. We will consider the student to be enrolled in an eligible program of study, determine eligibility for the loan programs, disburse funds, and be responsible for compliance with established policies, including the responsibility for determining refunds and/or repayments resulting from the student's withdrawal from classes. Your institution agrees to provide the University of Chicago with the cost of education, enrollment verification, change in enrollment status, and, if necessary, any supporting documentation. The contents of this agreement are effective for the term specified above, and are set forth to comply with Federal regulations.

Department/division for which student will enroll: \_\_\_\_\_ Term System:  Quarters  Semesters

Student's enrollment status:  full-time  half-time  less-than-half-time

<b>Costs of Attendance</b>	<b>Summer</b>	<b>Autumn</b>	<b>Winter</b>	<b>Spring</b>
<i>Date Each Term Begins</i>				
<i>Number of units/credits enrolled</i>				
Tuition				
Mandatory Fees				
Room and Board				
Books and Supplies				
Transportation				
Personal Expenses				
Other, please specify:				
<b>Total Costs of Attendance</b>				
<b>Institutional Grant/Gift Aid Awarded</b>				
<b>Institutional Loan Assistance Offered</b>				

Print Name \_\_\_\_\_  
Signature \_\_\_\_\_  
Fax Number \_\_\_\_\_

Title \_\_\_\_\_  
Phone Number \_\_\_\_\_  
E-Mail Address \_\_\_\_\_