



2009-10 Consortium Agreement (ASU as Parent Institution)

STUDENT FINANCIAL ASSISTANCE

Tempe campus

PO Box 870412
Tempe, AZ 85287-0412

Student Services Building,
Second Floor

Phone (480) 965-3355
Fax (480) 965-9484

financialaid@asu.edu

Downtown Phoenix campus

411 N. Central Ave., Suite 166
Phoenix, AZ 85004-2120

University Center Building,
Suite 166

Phone (602) 496-3462
Fax (602) 496-0376

financialaid@asu.edu

Polytechnic campus

7107 E. Tiburon, #3
Mesa, AZ 85212-0180

Student Affairs Complex, Quad 3

Phone (480) 727-1041
Fax (480) 727-1630

financialaid.poly@asu.edu

West campus

PO Box 37100
Phoenix, AZ 85069-7100

University Center Building,
Room 120

Phone (602) 543-8178
Fax (602) 543-8108

financialaid.west@asu.edu

SECTION A: STUDENT INFORMATION (PLEASE PRINT)

FULL NAME (LAST, FIRST MI.)	10-DIGIT ASU ID	9-DIGIT CAMPUS ID
MAJOR/PROGRAM	NON-PARENT INSTITUTION	
SEMESTER/YEAR	DATES OF ATTENDANCE	

Course Information (to be completed by the student; DO NOT leave answers blank)

- Are you participating in the ASU School of Social Work Tucson Component? Yes No
- Are you a College of Law student? Yes No
- What is your planned enrollment in regular credit hours for the semester in question (attach additional pages if necessary)?

Institution	Course Prefix #	Course Title	Credit Hours
At ASU (parent institution)			
At Non-Parent Institution			

SECTION B: DEADLINES, REQUIRED ACTIONS, TERMS & STUDENT SIGNATURE

Submission Deadlines (Deadline dates are firm; forms submitted late or incomplete will be returned unprocessed.)

Fall 2009: September 14, 2009
Spring 2010: February 8, 2010
Summer 2010: Contact our office for deadline

Required Actions

- Attach a copy of your paid registration schedule from your non-parent institution to this completed form. Failure to provide a paid registration schedule will result in this form being returned unprocessed.
- Return this form to Student Financial Assistance by the deadline above. If you are a law student, please return this form to the College of Law.
- Enroll in at least one ASU credit hour for the semester in question. Registration in correspondence or audit courses is not allowed. (Exception: College of Law student are not required to enroll in at least one ASU credit hour.)
- Notify Student Financial Assistance if you drop or withdraw from any courses. If you are a College of Law student, notify the College of Law.
- Transfer all non-parent institution credit hours to ASU. These credit hours must be counted toward the ASU 64 credit hour maximum.
- Submit official grade transcripts from your non-parent institution to the ASU Registrar's Office at the end of the semester for which this agreement was granted. Failure to submit grades in a timely manner will result in a hold on future financial aid disbursements. If you are a College of Law student, please submit these materials to the College of Law Registrar's Office.
- Due to system limitations, you may receive notification stating that you are not meeting ASU's Satisfactory Academic Progress requirements. If you receive this notification, please contact our office.

Terms (Please initial each line indicating that you have read and understand these terms.)

- _____ I must pay my non-parent institution. ASU will not provide early release of financial aid or send payment to your non-parent institution.
- _____ I will receive limited consideration for some financial aid programs according to the chart on the back of this form. (Exception: ASU School of Social Work Tucson Component student will receive full aid consideration.)
- _____ I will lose institutional scholarships if I am not meeting the renewal criteria. To retain other scholarships, such as private donor and academic department scholarships, you must submit a letter to the ASU Scholarship Office from the donor/department authorizing credit of your scholarship(s) at a lower ASU credit hour enrollment.
- _____ I can only enroll in non-parent institution courses that are applicable to my ASU degree or certificate program.
- _____ I can only receive financial aid from ASU for the semester in question. All financial aid records for this period will be maintained at ASU.
- _____ I must maintain Satisfactory Academic Progress as outlined by ASU's SAP policy (<http://students.asu.edu/policies/sap>).
- _____ I understand that ASU reserves the right not to enter into this consortium agreement if, in the opinion of ASU's Student Financial Assistance office, it would be administratively prohibitive.
- _____ I understand to contact my lender(s) to defer my past loans.
- _____ I understand this agreement does not guarantee an increase in the amount of financial aid I will be eligible to receive.

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years. I also agree to allow my non-parent institution to release requested student information to ASU's SFAO staff that relate to this agreement only.

STUDENT SIGNATURE	DATE
-------------------	------

SECTION C: ASU ACADEMIC ADVISOR CERTIFICATION STATEMENT (TO BE COMPLETED BY YOUR ASU ACADEMIC SUCCESS SPECIALIST)

I have reviewed this student's course of study and affirm that the non-parent institution courses listed on the front of this form are required, acceptable for transfer and will be applied toward the student's degree or certificate if completed with a grade of "C" or better and all other university requirements have been satisfied.

ACADEMIC SUCCESS SPECIALIST SIGNATURE & DATE	COLLEGE/DEPARTMENT
PRINT NAME	OFFICE PHONE NUMBER

SECTION D: NON-PARENT INSTITUTION CERTIFICATION STATEMENT (TO BE COMPLETED BY YOUR NON-PARENT INSTITUTION'S FINANCIAL AID OFFICE)

The student named on the front of this form is registered for ____ credit hours at the institution named below for the _____ semester. As the non-parent institution, we will not process this student for financial assistance, all records will be kept at Arizona State University (parent institution) and we agree to share information about this student's enrollment as requested by ASU's Student Financial Assistance office.

NON-PARENT INSTITUTION FINANCIAL AID OFFICE STAFF SIGNATURE	DATE	NAME OF INSTITUTION
PRINT NAME	INSTITUTION ADDRESS	
OFFICE PHONE & FAX NUMBER	INSTITUTION CITY, STATE ZIP	

SECTION E: ADDITIONAL INFORMATION

Use the table below to determine the amount you will receive based on the number of credits you will be enrolled in.

AWARD	# OF TERM CREDITS = % OF AWARD RECEIVED					
	UNDERGRADUATE			GRADUATE		
Federal Pell Grant	12+	=	100%	N/A		
	9-11	=	75%†			
	6-8	=	50%†			
	1-5	=	25%†			
LEAP Grant*, ASU Advantage*	12+	=	100%	N/A		
	1-11	=	0%			
Academic Competitiveness Grant, National SMART Grant, FSEOG*, SFAT Grant*, ASU Grant*, University Grant*	12+	=	100%	N/A		
	9-11	=	75%†			
	6-8	=	50%†			
	1-5	=	0%			
Teacher Education Assistance for College and Higher Education (TEACH) Grant	12+	=	100%	9+	=	100%
	9-11	=	75%	7-8	=	75%
	6-8	=	50%	5-6	=	50%
	1-5	=	25%	1-4	=	25%
Federal Perkins Loan*	12+	=	100%	9+	=	100%
	9-11	=	75%	7-8	=	75%
	6-8	=	50%	5-6	=	50%
	1-5	=	0%	1-4	=	0%
Federal Direct Stafford Loans, Federal Direct PLUS Loan, Federal Work-Study	6+	=	100%	5+	=	100%
	1-5	=	0%	1-4	=	0%
Scholarships	See individual donor and/or university criteria for your scholarship(s).					
*Only ASU hours are considered in determining the amount for this type of award (i.e., consortium hours do not count).						
†Amount of Pell, ACG and SMART awards are dependent upon enrollment status as well as your expected family contribution and cost of attendance. Contact Student Financial Assistance if you would like to know a definitive dollar amount.						

SECTION F: FOR OFFICE USE ONLY

CONFIRMED NUMBER OF CREDITS REGISTERED AT ASU	CONFIRMED NUMBER OF CREDITS REGISTERED AT NON-PARENT INSTITUTION	RECEIVED PAID RECEIPT FROM NON-PARENT INSTITUTION <input type="checkbox"/>
ASU FINANCIAL AID COUNSELOR SIGNATURE		DATE