

2023-2024 Study Abroad Consortium Agreement

Office Use Only		
First Name:	# of Pages:	Tracking Code:
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BID:	Prior Status:	Date Prepped:

A consortium agreement is a contract between two schools that recognize the registration of a student at each school for financial aid purposes. The consortium agreement certifies that only one of the two schools will administer financial aid. This form must be completed by all students who have financial aid (including merit) and will be studying abroad internationally unless the College already has a master consortium agreement on file for your program.

Student Information					
Student Name:	Home School: PROVIDENCE COLLEGE				
Banner ID:	Host Program & Country:				
Date:	Consortium Term: <i>(select one)</i>				
Email Address:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Summer 2023</td> <td style="width: 50%;">Fall 2023</td> </tr> <tr> <td>Spring 2024</td> <td>Fall 2023 & Spring 2024</td> </tr> </table>	Summer 2023	Fall 2023	Spring 2024	Fall 2023 & Spring 2024
Summer 2023	Fall 2023				
Spring 2024	Fall 2023 & Spring 2024				

Student Certification
<ul style="list-style-type: none"> I understand that it is my responsibility to sign the consortium agreement and then send it to my HOST program. I understand that it is my responsibility to ensure that the HOST program has returned my consortium agreement to Providence College. I understand that if my consortium agreement is not completed and returned to Providence College before the start of classes at my HOST program, it may result in cancellation of all aid at Providence College in the consortium term. I understand that it is my responsibility to work with the Bursar's Office if I have a credit after my direct charges at Providence College are paid in full. <p>Student's Signature: _____ Date: _____</p>

Host Program Costs	Host Program Enrollment Information
<i>Please complete or attach a separate form</i>	<i>Please complete each section</i>
Tuition:	Enrollment Status: <i>(select one)</i>
Fees:	
Housing:	Full-time.....12+ credits 3/4 time.....9 – 11 credits
Food:	1/2 time.....6 – 8 credits less than 1/2.....1-5 credits
Travel:	Enrollment Period:
Books & Supplies:	
Personal & Misc.:	
Other:	
TOTAL:	_____ to _____ <i>(month/day/year)</i> <i>(month/day/year)</i> 1st Day of Class Last Day of Class

Host Program Certification		
<p>As the HOME institution, Providence College is responsible for determining eligibility and distribution of all federal, state and institutional funding.</p> <p>As the HOME institution, Providence College will transfer funds according to the instructions the student provided to the Bursar's Office once all outstanding charges at the College have been paid in full.</p> <p>By signing this form, the HOST institution is certifying the student is enrolled for the term indicated on the front page and agrees to notify the HOME institution if the student changes their number of credits or withdraws from the program.</p>	_____ Authorized Host School Signature _____ Printed Name _____ Title _____ Phone	_____ Host Program Name _____ _____ Host Program Address _____ Email and Fax