

STUDENT CONSORTIUM AGREEMENT

Term _____

Academic Year _____

Student Name _____

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Last Four Digits Social Security Number

Address (street, city, state, zip) _____

Phone number _____

You must complete this form for each term of the consortium agreement.

1. To allow your financial aid budget to be calculated, fill in the number of credits you will take (or have taken) during the current academic year at each school in the consortium:

School	Student ID for School	credits fall	credits spring	credits summer

2. List the classes from each school in which you are enrolled for the **current** term.

Name\Course Number of Class	Credits	School	OFFICE USE ONLY

3. **TERMS OF AGREEMENT:** I hereby certify that I am admitted and am working toward a degree or certificate in _____ at _____, and that the courses listed above will apply to that program. I recognize that I must maintain satisfactory academic progress. I authorize the schools listed above to furnish the other listed schools with all information (including grades, attendance information, etc.) relevant to the administration of financial aid. I hereby agree to immediately notify the Financial Aid Office of all involved institutions should I make a course change or withdraw before the end of the term. I recognize that it is my responsibility (whether I receive financial aid or not) to pay all tuition, fees, and other charges for the courses for which I register when they fall due. **I understand that financial aid funds cannot automatically pay participating school(s).**

Student Signature _____

Date _____

4. Submit this form together with a billing statement (showing you are enrolled) from each participating school to your LOCAL Financial Aid Office. Your local Financial Aid Office will explain how your aid will be disbursed.

OFFICE USE ONLY:

Student has submitted proof of enrollment in above courses.

Signature, Participating School Financial Aid Administrator**Participating schools verify they ARE NOT providing financial aid for above term. Fax completed form to Disbursing School.**

Student is enrolled in above degree/certificate program.

Signature, Disbursing School Financial Aid Administrator

Does student receive Donor Money or Scholarship at Participating School?

☐ No ☐ Yes

Amount: _____

Source: _____

Disbursing School

Participating School

Participating School

Signature/Date

Signature/Date

Signature/Date

S.A.P / TOTAL HOURS

Complete after grades are posted for above classes. Record grades above and fax to Disbursing School.

Cumulative Credits/School

Cumulative Credits/School

Cumulative Credits/School

2015-16 School Procedures For Consortium Agreements

STUDENT:

1. Student completes consortium application including obtaining professor's signatures (if required) and turns it in to their local financial aid office.

PARTICIPATING SCHOOL:

1. Complete your portion and fax the form to the Disbursing School. Keep a copy of the form in your files. Donor money includes: Vocational Rehabilitation, Veterans benefits, tribal funds, employment benefits, private scholarships, etc. When in doubt, please include it. Please cancel any outstanding financial aid at your institution.
2. If a student withdraws from a class, note the withdrawal date and fax the application to the disbursing school.
3. When grades are posted at your institution, record them in the OFFICE USE ONLY section next to the listed courses. Complete the Satisfactory Academic Progress portion and fax the form again to the Disbursing School.

DISBURSING SCHOOL:

1. Complete the Disbursing School portion and make certain that Participating School have signed that they are NOT PROVIDING aid to the student.
2. Upon receipt of completed forms from Participating School, disburse aid to the student.
3. Review student's satisfactory academic progress information from Participating School.

College	Fax	Counselor	Phone	Email	Students
Dixie State University	(435) 879-4087	Jason Crowley	(435) 652-7582	jcrowley@dixie.edu	Primary Contact
		Roberta Cole	(435) 652-7584	rcole@dixie.edu	Back up
Salt Lake C.C.	(801) 957-4657	Brandee Jacobsen	(801) 957-4708	brandee.jacobsen@slcc.edu	
Snow College	(435) 283-7134	Jack Dalene	(435) 283-7130	jack.dalene@snow.edu	
Southern Utah University	(435) 586-7736	Alene Laursen	(435) 865-8162	laursen@suu.edu	A,B
		Jayson Matlock	(435) 586-5485	jaysonmatlock@suu.edu	C, D, E, F, G
		Malinda Rhodes	(435) 865-8714	rhodes@suu.edu	H, I, J, K, L,M
		Paul Allen	(435) 586-7760	paulallen@suu.edu	N, O P, Q, R,S
		Colin Ward	(435) 586-1930	colinward@suu.edu	T, U, V, W, X, Y, Z
University of Utah	(801) 585-6350	Marc Gangwer	(801) 585-5829	mgangwer@sa.utah.edu	ID: 0-49
		Chelsea Springer	(801) 585-5828	cspringer@sa.utah.edu	ID: 50-99
Utah State University	(435) 797-0654	Brook Peacock	(435) 797-0175	Brook.peacock@usu.edu	A,B
		Amanda Alles	(435) 797-0191	amanda.alles@usu.edu	C, D
		Jacob Brazell	(435) 797-0181	jacob.brazell@usu.edu	E, F, G
		Shannon Anderson	(435) 797-9076	shannon.anderson@usu.edu	H,I,J
		Raquel Friddle	(435) 797-0649	raquel.friddle@usu.edu	K
		Jenn McGaughey	(435) 797-0593	jennifer.mcgaughey@usu.edu	L,M
		Sophara Tieng	(435) 797-0335	Sophara.tieng@usu.edu	N,O,P, Q, R
		Chelise Elwood	(435) 797-0318	Chelise.elwood@usu.edu	S, T,U,V
		Cedra Jensen	(435) 797-0187	cedra.jensen@usu.edu	W, X, Y, Z
USU Eastern	(435) 613-5814	Tammie Pantelakis	(435) 613-5322	tammie.pantelakis@usu.edu	
Utah Valley Univ.	(801) 863-8448	Sarah Sherwood	(801) 863.6546	Sarah.Sherwood@uvu.edu	
Weber State Univ.	(801) 626-7408	Janet Nelson	(801) 626-6583	jcnelson@weber.edu	

2014-15 Consortium Budget Components: tuition includes regular student body fees.

University	Tuition	Books
Dixie State College	4454	900
Salt Lake Community College	3470	1680
Snow College	3388	1250
Southern Utah University	5416	1600
University of Utah	7166	1280

University	Tuition	Books
Utah State University	6250	1260
USU Eastern	6250	1260
Utah Valley University	5270	718
Weber State University	5184	1200

Updated: September 24, 2015