

MIDWESTERN STATE UNIVERSITY STEPS FOR SECURING YOUR CONSORTIUM AGREEMENT

Consortium agreements allow students to enroll in courses at another institution (also known as the 'Host' institution) that are transferable to his/her degree program at MSU. Consortium agreements allow a student to be registered at both institutions simultaneously while receiving financial aid at MSU based on the combined enrollment of both institutions. ***NOTE: a consortium will be approved only if MSU enrolled hours are greater or equal to the number of enrolled hours at the HOST institution. HOWEVER, students who are dual-enrolled at MSU and at an approved college/university in accordance with specific matriculation agreements (including, but not limited to, the MSU Respiratory Care at Weatherford College and Collin College OR Radiology Program at North Central Texas College, Weatherford College, Tarrant County Community College and Brookhaven College OR the RN-BSN Nursing Program at Tarrant County Community College) may receive financial aid at MSU regardless of the number of enrolled hours at each institution.***

The Consortium Agreement form (as detailed below) must be received in the MSU Financial Aid Office on/before the following deadline dates:

- Fall Submission Dates: August 1 - September 15
- Spring Submission Dates: December 1 - February 15
- Summer I Submission Dates: May 1 - June 15
- Summer II Submission Dates: June 1 - July 15

Additionally, the enrollment period at the Host institution must coincide with the MSU enrollment period, as follows:

- Fall: August - December
- Spring: January - May
- Summer I: June - July
- Summer II: July - August

A student who wishes to have a Consortium Agreement completed between MSU and an approved Host institution must print and complete the 'Consortium Agreement' form (see the following pages) in accordance with the following: (NOTE: Incomplete forms will not be accepted).

Step 1 – Complete your student information AND indicate the number of hours for which you will be enrolled at each institution AND indicate the Host institution you will be attending. ***NOTE: a consortium will be approved only if MSU enrolled hours are greater or equal to the number of enrolled hours at the HOST institution. HOWEVER, students who are dual-enrolled at MSU and at an approved college/university in accordance with specific matriculation agreements (including, but not limited to, the MSU Respiratory Care at Weatherford College and Collin College OR Radiology Program at North Central Texas College, Weatherford College, Tarrant County Community College and Brookhaven College OR the RN-BSN Nursing Program at Tarrant County Community College) may receive financial aid at MSU regardless of the number of enrolled hours at each institution.*** Also, indicate the enrollment period for which you are requesting the consortium; CHECK ONLY ONE ENROLLMENT PERIOD as you must complete a separate consortium form for EACH enrollment period for which you are requesting the consortium.

Step 2 – List the course(s) for which you will enroll at the Host institution. **Visit with your MSU academic advisor to ensure the course(s) will apply towards your MSU degree.** NOTE: Please read the important information regarding Repeating Coursework at <https://www.msutexas.edu/financialaid/3peat.php>.

Step 3 – Upon agreement, your MSU academic advisor must complete/sign the consortium form to confirm the course(s) will apply towards your MSU degree.

Step 4 – Complete your student information. *Then, YOU (the student) must submit the form (Steps 1-4) to the Host institution's Financial Aid Office to complete/certify the Consortium Agreement.*

The Host institution MUST return the completed form (Steps 1-4) to the MSU Financial Aid Office – you, the student, may not deliver the completed form to the MSU Financial Aid Office as the form MUST be submitted via the Host institution's Financial Aid Office.

Remember to allow 2-3 weeks for the consortium request to be processed by the MSU Financial Aid Office upon receipt of the completed certification from the Host institution.

Please contact the MSU Financial Aid Office at 940:397-4214 or email financial-aid@msutexas.edu should you have any questions regarding this program.

**MSU FINANCIAL AID OFFICE
CONSORTIUM AGREEMENT**

In accordance with federal regulations, a Consortium Agreement must exist before a 'home' institution (or, MSU) can process an application for federal funds for students attending another institution. Therefore, the two institutions named below herein enter into a Consortium Agreement for:

STEP 1 - To Be Completed By the Student:

Student Name (Please Print): _____

Social Security Number: XXX – XX – ____ ____ ____ ____ **MSU Mustangs I.D.:** M _____
(last 4 digits only)

HOME Institution: **Midwestern State University (MSU)** # of enrolled hours _____

HOST Institution: _____ # of enrolled hours _____

Enrollment Period For Which This Consortium Applies (Check only ONE enrollment period as you must complete a separate consortium form for EACH enrollment period for which you are requesting the consortium):

- Fall 20** _____ **Spring 20** _____ **SS1 20** _____ **SS2 20** _____

STEP 2 - To Be Completed By the Student:

I will be enrolled in ____ credit hours at the above-mentioned Host institution for the following reason(s): _____

I understand I may be required to repay financial aid (grants/loans) if I **drop a course(s) OR completely withdraw** during the enrollment period specified above. My enrolled course(s) at the Host institution is indicated below:

Host Course Description	Course Prefix	Course Number	Credit Hours

I also understand I MUST **provide an unofficial academic transcript from my Host institution (which may be printed from the Host institution's website) to the MSU Financial Aid Office to confirm completion of this course(s) at the end of the semester/term.** I further understand that failure to provide the transcript will result in a 'hold' being placed on my grades/records until the transcript(s) is received and future registration/disbursement of aid, if any, will not be released until the Host institution's unofficial academic transcript(s) is received in the MSU Financial Aid Office.

Student's Signature: _____ **Date:** _____

Phone # (_____) _____ **E-mail Address:** _____

STEP 3 - To Be Completed By The MSU Advisor, Department Head or College Dean:

I certify that (Print Student Name) _____ has been approved to enroll at

(Host institution) _____ for the _____ semester/term. I also certify that the credit hours will apply towards the student's degree requirements and will transfer back to MSU to be recorded on the student's transcript.

This transfer credit will satisfy **MSU course number** _____.

PRINT Name of MSU Advisor, Department Head or College Dean Title

Signature of MSU Advisor, Department Head or College Dean Date

HOST INSTITUTION CERTIFICATION

STEP 4 - To Be Completed By the Student:

Student Name (Please Print): _____

Social Security Number: XXX – XX – _____ Student I.D. at Host Institution: _____
(last 4 digits only)

To Be Completed By the Host Institution Financial Aid Office:

Semester/Term of Consortium : _____ Enrollment Dates: From _____ To _____
Month/day/year Month/day/year

Host Course Description	Course Number	Credit Hours

Please indicate below all financial aid (grants/scholarships/loans) the student will receive at your institution. If the student will not receive any aid, please indicate as 'Not Applicable'.

Award	Semester Received	Amount

CERTIFICATION: We, the Host Institution, will **NOT** provide federal funds to the above-mentioned student for the semester/term(s) specified above. We, the Host institution, will be responsible to notify Midwestern State University's Financial Aid Office should the student receive any financial aid funds at our Host Institution.

PRINTED Name of Host Institution Representative Title

Signature of Host Institution Representative Date

Name of Institution _____

Address _____ City _____ State _____ Zip _____

Phone # (_____) _____