

Student Financial Aid Information

If you intend to request financial aid for your study abroad (SA) program, complete this form and submit it with your other completed SA materials to the Office of Admissions. **After an admission counselor completes the boxed section and returns the form to you, you will need to submit the form to the Office of Student Financial Services, 432 N. Murray Street.** You will also need to read carefully the *Financial Aid Consortium Information* and follow the instructions for the consortium (on the SA Web site).

Please print:

Name: _____
Last First Middle

Campus ID #: _____ - _____ - _____

Study Abroad Program:

Name: _____

U.S. Sponsoring University/College:

Name: _____

Location: _____
City Country

Location: _____
City State

Study Abroad Dates and Term(s) of Attendance:

Dates: FROM ____/____/____ TO ____/____/____
mo day year mo day year

Terms: (check all that apply)

- fall
- winter
- spring
- summer

Current Enrollment Status at UW–Madison:

of credits completed: _____ (as of: _____)
term / year

of credits in progress: _____ (_____)
current term / year

For Admissions Office Use Only
(to be completed by admission counselor)

Number of SA credits approved: _____

By Office of Admissions counselor:

Name (printed): _____

Signature: _____

Date: _____

ORIGINAL: to student COPY: for file



Office of Admissions
716 Langdon Street
Madison, WI 53706-1481
608/262-3961
Fax: 608/262-7706
www.admissions.wisc.edu/studyabroad
studyabroad@admissions.wisc.edu

A “Consortium Agreement” is an agreement made by two institutions’ financial aid offices for the purpose of providing financial assistance to a student who is temporarily attending a school (called the host school) other than the school from which the student expects to graduate (the home school).

If you intend to study through another university’s study abroad program or at another university, you must follow the process described here to be eligible for financial aid and for your financial aid to be disbursed. Note that the Faculty Committee on Admissions, Recruitment, and Financial Aid stipulates that students who participate in non UW–Madison sponsored programs through a consortium agreement may be considered for the following funds only:

Pell grant, Voc Rehab grant, Handicap grant, Gear Up grant, WIG, WHEG, TIP, Lawton grant (if eligible), and FFELP loans (Stafford and PLUS).

To be eligible under the consortium agreement, you must be enrolled at least half time through the host school. You cannot combine enrollment at the two institutions to add up to half-time enrollment. You must also attend a study abroad program that is sponsored by a Title IV eligible school to be considered for financial aid. UW–Madison’s Office of Student Financial Services (OSFS) will not process financial aid for students who attend a foreign school directly or through a broker agency.

Consortium Process

1. Contact the host school to see if they will fund you. Make sure the school understands that you will be enrolled as a guest student, not a degree candidate. If they will fund you, follow their aid process.
2. If the host school will not fund you, contact UW–Madison’s Office of Student Financial Services (OSFS) to begin the consortium process.
3. You must go through the same financial aid process as all UW–Madison students. Submit the necessary forms (e.g. FAFSA, Parent and Student Tax Return, etc.) to OSFS.
4. Complete and send the attached *Consortium Agreement* form to the host school. By signing the agreement, the host school agrees not to fund you and agrees to notify UW–Madison of any changes in your enrollment. The consortium form must be completed and returned to UW–Madison’s Office of Student Financial Services, 432 N. Murray Street. It is your responsibility to ensure that the form reaches OSFS. No action will be taken on your financial aid application until both the *Consortium Agreement* form and the attached *Student Financial Aid Information* form (see next step) are received by OSFS.
5. Complete the *Student Financial Aid Information* form and submit it to the Office of Admissions with your other SA materials. After an admission counselor signs and returns this form to you, submit the form to OSFS. No action will be taken on your financial aid application until OSFS receives both the *Student Financial Aid Information* form and the *Consortium Agreement* form.
6. Funds will be disbursed according to the same schedule as all other UW–Madison disbursements.
7. Before you leave, drop any UW–Madison classes in which you may be enrolled for a current or future term.
8. Before you leave, update your address information carefully on MY UW. Your UW student e-mail account may not be active during your absence, so you’ll need to list another valid e-mail address on MY UW. You will also need to list a U.S. mailing address where family or friends will be able to watch for university mail for you. If your mailing address is the same as your permanent home address, you may simply list the permanent address and leave the mailing address blank. Do NOT list a foreign mailing address.
9. Finally, be active in this process. It takes time to complete it, so start early. Check every 3–4 weeks to make sure the process is running smoothly.



CONSORTIUM AGREEMENT

To be completed by student:

HOME INSTITUTION:

Attn: Financial Aid Advisor
University of Wisconsin – Madison
Office of Student Financial Services
432 North Murray Street
Madison, WI 53706-1496

AND

HOST INSTITUTION:

In the matter of student financial aid for:

Name of Student

Social Security Number

To be completed by host school:

1. The **HOME** Institution considers the above-named student to be accepted as a degree-seeking candidate and will disburse aid, although the student will be attending classes at another institution.
2. The **HOST** Institution agrees **NOT TO PROVIDE** financial aid for the above-named student for the term specified.
3. The **HOST** Institution will verify enrollment status; in addition, the **HOST** Institution will notify the **HOME** Institution of any changes in enrollment status.
4. The **HOST** Institution confirms the following:

COST OF ATTENDANCE:

Tuition and Fees	\$ _____
Room and Board	\$ _____
Books and Supplies	\$ _____
Transportation	\$ _____
Other (specify)	\$ _____

TOTAL	\$ _____

ENROLLMENT STATUS:

Number of Credits _____

ENROLLMENT PERIOD (Check one):

Summer – Number of Weeks of Enrollment _____

Fall _____ Spring _____

Host Institution Title IV OE Code _____

****Note: We will not fund students who attend a foreign school program that is not sponsored by a Title IV eligible school.**

On behalf of the HOST INSTITUTION:

_____ Signature Financial Aid Officer	_____ Printed Name and Title	_____ Date
--	---------------------------------	---------------

Office of Student Financial Services
 University of Wisconsin-Madison 432 North Murray Street Madison, Wisconsin 53706-1496
 608/262-3060 Fax: 608/262-9068 Email: finaid@finaid.wisc.edu <http://www.finaid.wisc.edu>