

Consortium Agreement

This agreement allows degree seeking students to receive Federal Student Aid at NMHU for combined enrollment at two institutions. NMHU will calculate and disburse student's Federal Student Aid awards. All credit hours at each institution must apply to the student's NMHU program of study/degree plan.

STUDENT INFORMATION

LAST NAME: (PRINT)	FIRST NAME: (PRINT)	MI:	STUDENT NMHU ID
NMHU EMAIL:		TELEPHONE:	

Check this box if you are receiving the N.M. Legislative Lottery Scholarship at NMHU

TERMS & CONDITIONS:

You will be responsible for payment on your student account at both institutions regardless of where you are receiving your financial aid. NMHU Office of Financial Aid and Scholarships does not make payment on your behalf to the visiting institution.

Students must be enrolled in at least **6 credit** hours at NMHU for fall/spring terms or **3 credit** hours for the summer term.

Students must meet all Federal Student Aid eligibility requirements at NMHU including Satisfactory Academic Progress including repeated courses that meet aid eligibility requirements to apply for the Consortium Agreement.

If you are a recipient of the New Mexico Lottery Success Scholarship, you may enter into a consortium with another institution, and be eligible for the scholarship as long as you are enrolled full time (minimum 15 hours) between the two institutions.

Complete withdrawal from both NMHU and the Visiting Institution will result in voiding the Consortium Agreement and a Return of Title IV funds will be calculated.

Deadline for completed, signed Consortium Agreements with a copy of the Visiting Institution class schedule and billing statement is 5:00 pm on the 3rd Friday of the term (Census).

If you fail to meet any of the conditions of this consortium agreement (including academic progress at both schools), the NMHU Office of Financial Aid and Scholarships has the authority to hold future consortium requests until the final grades are provided.

I understand the Terms and Conditions and agree to participate in the Consortium Agreement according to NMHU guidelines.

 Student Signature (Original Signature Required)

 Date:

Section 2: Academic Advisor Certification (To be completed by a Faculty/Academic Advisor)

NAME OF VISITING INSTITUTION: _____

ENROLLMENT PERIOD: FALL 201 ____ SPRING 201 ____ SUMMER 201 ____

NMHU credit hours _____ + Host credit hours (list course(s) below) _____ = Total credit hours: _____
 (6 credit min.) (Cannot exceed NMHU credit hours)

Host School Course Info:

COURSE PREFIX & NUMBER	TITLE OF COURSE	CREDIT HOURS	START DATE	END DATE
EX: MGMT 300	Principles of Management	3	8/15/2015	12/15/2015

Note: You may need to submit proof of enrollment

Student's Degree Program: _____

As the student's academic advisor, I certify that the course(s) the student is enrolled in at the VISITING school are applicable to the degree, either as a program requirement or as general education. Further, the student has not previously earned credit for these courses, nor has the student transferred these courses to NMHU. I have confirmed with the student that his/her current degree program is accurate in NMHU's records.

NMHU Academic Advisor signature: _____ Date _____

Section 3: Visiting Institution Information (To be completed by the Financial Aid Office)

TUITION ONLY:	
FEES:	
TOTAL:	

Please complete this section confirming the student's enrollment in the number of credit hours listed above and the amount of tuition/fees billed at your institution.

 Authorized Financial Aid Representative Signature Date

 Printed Name and Title

 Email

 Telephone number