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CONSORTIUM/CONTRACTURAL AGREEMENT

For Pace University Students studying abroad or away from Pace University

BETWEEN

Pace University	and	
(Home School)	(Host School)	
The Home School and the Host School listed	above are hereby entering into a consortium/contractual agreement	
Section I: To be completed by the Student		
Name:	Social Security Number:	
Telephone Number:	E-mail Address:	
Current Permanent Address:	Address While Studying Away (if known)	
Consortium Period: Summer ☐ Fall ☐	Spring Year:	
Under this consortium/contractual agreement, the student will:		
 Maintain satisfactory academic progress Take courses at the Host School, which are or recognized credential as certified by his Provide proof of registration of courses to l Notify the Home School financial aid office above stated period Immediately inform the Home and Host Sc withdrawing from any or all courses or sub Ensure that the Host School provides the H completion of the consortium period. File a FAFSA and complete the required file Pay tuition, fees, and other expenses as cha 	be taken at Host School if you do not begin attendance at the host school for the chool of any change in enrollment status, including ostitution of approved courses. Home School with a Host School academic transcript upon nancial aid process prior to all applicable deadlines. Arged by the Home and/or Host School by the payment chool their individual payment policies as it pertains your	
International Office for submission with this form.		
Student's Signature:	Date:	

Section II. To be completed by the Host School Financial Aid/Student Account Officer			
Section II: To be completed by the Host School Financial Aid/Student Account Officer			
Enrollment dates: From: To:	Number of Cred	its:	
Tuition & fees: \$	Room & board:	\$	
Books & supplies: \$	Transportation:	\$	
Misc. personal expenses: \$	Other (specify):	\$	
Under this consortium/contractual agreement, the Host School:			
1. Certifies that the student listed has been accepted for enrollment in an academic program that meets the			
Title IV student financial aid eligibility requirements (IF consortium agreement)			
2. Will make available applicable student consumer information required under Title IV (IF consortium			
agreement).			
 3. Will provide the Home School with documentation of the student's enrollment at the Host School. 4. Agrees to notify the Home School if the student fails to enroll in, or withdraws from, the Host School (to 			
include the withdrawal date and other relevant information).			
5. Will provide the Home School with a Host School academic transcript upon completion of the consortium			
period			
Host School Financial Aid/Student Account Officer Signature:			
Print Name:	Title:		
E-mail Address: Date:			
Telephone: Fax Number:		umber:	
	**		
Section III: To be Completed by Pace University's Financial Aid Officer			
The Financial Aid awards to be received by the student for the stated period of attendance are as follows:			
Federal Direct Loans: SubsidizedUnsubsidizedPlus			
Federal Pell Grant Federal SEOG			
TAP (If student wishes to have Host School process NYS TAP (Host School MUST be a NYS school), the student must make special arrangements with the Pace University TAP Coordinator)			
OtherTOTAL AID: Disbursement Dates :			
NOTE: Students visiting other schools under this consortium agreement, <u>do not</u> qualify for Pace University institutional aid programs, i.e., Merit Scholarships, Endowed Funds or Pace Grant. Only IF a consortium agreement, the Home School:			
1. Agrees to process the student's Title IV financial aid and provide payment of Title IV funds, if the student is eligible.			
2. Will make available applicable student consumer information required under Title IV.			
3. Certifies that the student is making satisfactory academic progress toward the completion of his or			
her degree, certificate, or recognized credential at the Home School.			
4. Will conduct Enrollment Reporting to the National Student Loan Data System (NSLDS).5. Will calculate returns of the Title IV funds, when appropriate.			
6. Will maintain Title IV record keeping and reporting requirements.			
Financial Aid Officer's Signature:			
Print Name/Title:		Date:	
E-mail Address:		Fax # 212-346-1750 Fax # 914-773-3315	