Consortium Agreement

Please Return To:
Office of Financial Assistance ' U IR$ E
KWWSV ZZZ YLOODQRYD HGX YLOODQRYD HQUROO ILQD

Student's Name: _____ Villanova University Student ID Number: _____
(8 Digit Number)

The Consortium Agreement is a contract between the student, Villanova University (the home institution), and the host institution (the other institution the student will be attending). Please note only courses approved by your faculty advisor or academic dean will be taken into consideration.

Section I. To Be Completed by the Villanova University Faculty Advisor or Academic Dean:

Will the student be taking courses at Villanova University during the time the student will be enrolled at the Host Institution? Yes Number of Credits _____ No

Indicate the semester, (term and year) that student will be enrolled at the Host Institution: _____

List the number of credits the student will be taking at the Host Institution: _____

By signing this agreement, I give permission to the student named above to enroll in courses at the Host Institution and certify that the credits earned will be transferred and applied towards the student's degree requirements at Villanova University.

_____ _____
Name of Faculty Advisor/Academic Dean Date Phone and Fax Number

_____ _____
Signature of Faculty Advisor/Academic Dean Date Email Address

Section II. To Be Completed by the Host Institution:

Name of Host Institution: _____

_____
Street Address City State ZIP Code

Program Costs

Tuition & Fees	Room & Board	Books & Supplies	Transportation	Miscellaneous	Total

Enrollment:

Enrollment Period Start Date	Enrollment Period End Date	Total Credits	Online Y/N

By signing this agreement, I agree to notify Villanova University in writing if the students fails to register, changes enrollment status, or withdraws from his/her courses. I also agree to not process or disburse any federal or state funding to the student.

_____ _____
Printed Name and Title of School Official Signature of School Official Date

_____
Phone Number and Email Address