

Student Financial Aid Office
Department of Enrollment Management
Divisions of Academic and Student Affairs

University of Cincinnati PO Box 210125 Cincinnati, OH 45221-0125

(513) 556-6982 (513) 556-9171 fax financeaid@uc.edu www.financialaid.uc.edu

Financial Aid Contractual Agreement with Foreign Schools Ineligible to Award or Accept Title IV Funds

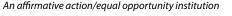
Name	SSN			
Home Address	Address while enrolled at visited school			
City ST Zip				
Phone ()	City ST Zi	p		
E-mail@	Phone ()_			
Check: X Study Abroad Attending non-U.S. school; not uti	ilizing a Title IV-eligible school or program			
	h (0) 1 1 (10)	4 - 10		e One*
Home/Degree Granting Institution Unive	ersity of Cincinnati (UC)	Aid?	Y	N
Host/Visited Institution		Aid?	Y	N
	to			

TERMS OF THE AGREEMENT

The above named individual is a degree-seeking, regular student enrolled in an eligible program of study at the University of Cincinnati. The University of Cincinnati has given academic permission to take course work at the host institution and agrees to give credit for the course work on the same basis as if taken at the home school. The University of Cincinnati further agrees to the following: report enrollment information to NSLDS, establish the total cost of the student's attendance with information provided by the host institution, confirm that the student remains eligible for Title IV funds at the time of disbursement, disburse Title IV funds, notify student of and monitor satisfactory academic progress, include the student on the FISAP, define the applicable refund required consumer information, and keep any and all required records.

The host institution agrees to the following: confirm the student's enrollment on the University of Cincinnati's Verification of Overseas Enrollment form or by other means after classes have started, notify University of Cincinnati of any changes in student's enrollment status, provide information about the student's cost of attendance, provide an academic transcript at the completion of the student's enrollment, make available required student consumer information, and maintain any and all required records.

This document has been drawn up to comply with all pertinent federal, state and University of Cincinnati regulations.



Hairranaiter at	Cinainnati Financial	A: d Cambua streal Amusau	ment for (student name)

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T) RF	COMPLETED	RV STUDENT	& ACADEMIC	ADVISOR

Course(s) to be taken at Host School		Credits	Term*	C	redit Ty	pe*
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
			Qtr Sem	Major	Gen Ed	Elective
*Circle appropriate responses					C	ircle One
Is this student in good academic stand	ng with the home institutio	n?			_	Y N
Upon successful completion, will the a	•		ree progra	m?	,	Y N
Academic Advisor Signature (Home Insti	tution) Name (Print)	Title				
College/Program	() Phone	E-mail				
College/Program	Pnone	E-maii				
BE COMPLETED BY THE HO Term of enrollment: Tuition & Fees: \$ Room & Board: \$ Other Expenses: \$	quarter/seme Program Sta Program End	ster of the rt Date (MM/DD/YYYY l Date (MM/DD/YYYY) Enrolled)			•
TOTAL: \$	Status (circle o	ne): FT 3/4	1/2 L	ess		
School Name and Address						
Representative Signature	Name (print)	Title				
	()	()				
E-mail	Phone	Fax			Date	
		A T				
BE COMPLETED BY THE UN						
Term of enrollment:	quarter/seme	ester of the			_ acade	mic year.
Student's academic status (circle one):	FR SO JR	SR GR				
School Name and Address						
Financial Aid Representative Signature	Name (print)	Title				
	()	()_				
E-mail	Phone	Fax			Date	

This agreement must be complete and on file before any funds are released. Because the host institution is not eligible to award/receive Title IV funds, all eligible funds will be paid to the student. It is the student's responsibility to meet payment obligations with the host institution.