

CONSORTIUM AGREEMENT

(For study at another college/program)

This Consortium Agreement (CA) will allow you to use some of your federal student aid (Federal Pell Grant, Federal Direct Subsidized and Unsubsidized Loans, Federal Direct PLUS loans), and TAP (if you are a New York resident attending a New York State School full-time) at another approved school or program. Please note that this agreement cannot be used for campus-based or Pratt aid programs. Federal regulations allow only one institution, the "home institution," to award federal financial aid. As the "home institution," Pratt can recommend these forms of aid when its students study elsewhere, and obtain permission in advance to transfer the courses to the Pratt degree program. Academic progress standards for Pratt do not change during period of agreement. As the home school, Pratt will pay on the Pell Grant of eligible students. Awards are based on the actual cost of attendance at the Consortium School.

This form may be used for courses approved to be taken elsewhere, provided you have the form completed by the Consortium School/Program. As with most forms of aid, you must also file a Free Application for Federal Student Aid (FAFSA) using PRATT's Federal School Code of 002798 and meet any published deadline dates.

Refunds: Pratt can transfer funds either to the student or directly to the Consortium School/Program. You should contact the Student Financial Services to make arrangements for transferring the funds. No funds will be made available to the student, or the Consortium School/Program, until all funds are actually received here at Pratt. The loan proceeds will automatically be sent to the Pratt's office of Student Financial Services. The student must be in good financial standing at Pratt; all debts must be paid. In some cases, funds may not be received until as late as one or two months after the beginning of the semester. If the student is dependent upon these funds to pay their bill with a Consortium School/Program that requires payment before a refund may be issued from Pratt, alternative arrangements should be made with the Consortium School/Program to have their bill covered.

SECTION A: TO BE COMPLETED BY STUDENT AND FORWARDED TO NON-PRATT PROGRAM

Student Signature: Date:			
Academic Dean Email:		Academic Dept.:	
Academic Dean Signature		Date:	Ext:
8. The above student has permission to attend. The Pratt. The student also understands it is their responsible. By signing below, the student certifies that the including total withdrawal of all classes and / or subsections.	onsibility to request the Coney will notify both Pratt a	onsortium School provio	de an academic transcript to
7. List the approved course(s):			
6. Do you receive financial aid from non-PRATT so	ources? Yes No	If yes, please specify s	ources and amounts:
Federal Direct Subsidized/Unsubsidized I Federal Pell Grant Other (name)			
5. This agreement applies to:			
 2023-2024 Academic Year 2023 Fall Semester Only 2024 Spring Semester Only 2024 Summer Session(s) Only 			
4. I will be in the following non-PRATT program: _			
3. Email Address:	Address while Abroad:		
2. Permanent Address:		Telephone:	
Student Name:		SID:	

SECTION B: TO BE COMPLETED BY THE CONSORTIUM SCHOOL

Name of the U.S. College/University that will receive federal funds:				
2. Is your College/University approv	red by the U.S Dep	partment of Education to receive	Γitle IV Federal Funds?	
☐ Yes ☐ No (If no, stude	nt should contact	Student Financial Services at Pra	tt)	
Please list your title IV cod	e:			
3. Address:				
Program Director/Title:				
5. Telephone Number: ()				
6. Enrollment Status:	Total Credits	Enrollment Period Dates:	to	
Less than half -time				
☐ Half-Time ☐ Three-quarter time				
Full-Time				
7. Estimated Costs:	Amount			
Tuition		_		
Fees Room & Board		-		
Books & Expenses		_		
Travel		-		
Other TOTAL		-		
		-		
8. Is your program providing this stu	udent with any fina	ncial aid? Yes No		
If yes, describe and provide amounts	s:			
O Contact information for Heat Oak	a al Daint of Dayma	out (Name Adduses Dhears Name	and Farrit Address).	
Contact information for Host Sch	ooi Point oi Payme	ent (Name, Address, Phone Numi	Der and Email Address):	
				
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CERTIFICATION:

- A. The Consortium School certifies that the student listed has been accepted for enrollment in the program specified on this form and that the program meets the federal requirement for financial aid. The program is at least 15 weeks in length, and the academic year is 30 weeks in length. If the student is enrolling for a summer term, the Consortium School certifies that the summer term meets the requirements for Title IV aid eligibility.
- B. The Consortium School agrees not to pay the student Pell Grant, campus based funds, or process any federal loans during the enrollment period listed on this form. Pratt will agree to process the student's Title IV financial aid application and provide payment of Title IV funds (if eligible) as appropriate for the consortium period.
- C. The Consortium School agrees to provide Pratt with documentation of the student's enrollment at the Consortium school, including if the student changes his/her enrollment status or withdraws from the program before its conclusion. In the event of student withdrawal, the Consortium School must provide the withdrawal date and dates of academic semester as soon as the withdrawal date is determined. Pratt will be responsible for R2T4 determination and appropriate return of funds. Satisfactory conclusion of the program will be evidenced by an academic transcript upon written request of the student. The Consortium School agrees to notify Pratt of any failure to demonstrate satisfactory progress or attendance.
- D. Pratt certifies the student is making satisfactory academic progress toward the completion of their Pratt degree.
- E. The Consortium School agrees to notify Pratt if the student is not attending classes regularly.
- F. Both Pratt and the Consortium school will make available applicable consumer information required under Title IV.
- G. Pratt will maintain all Title IV recordkeeping and reporting requirements, including Enrollment Reporting to NSLDS.

Signatures: (Please note: Federal Regulations permit the signatures of Financial Aid Counselors.)

I certify that the above information is true and complete and that I will notify Pratt if any of this information changes.

For: Pratt Institute	For: the Consortium School
Print Name and Title	Print Name and Title
Date	Date
Email Address	Email Address

Please submit this form by one of the following and include the student's Pratt Student ID # on all pages:

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MAIL/IN PERSON	FAX	SCAN/EMAIL			
Pratt Institute Student Financial Services 200 Willoughby Avenue Brooklyn NY 11205	718-636-3539	sfs@pratt.edu			