



California State University, Sacramento
 Student Service Center
 Financial Aid & Scholarships Office
 Lassen Hall
 6000 J Street, Sacramento, CA 95819-6044
 Phone: (916) 278-1000

Print Name: _____

Sac State ID #:

2023-2024 CONSORTIUM AGREEMENT - Fall 2023

The consortium agreement is semester process that allows Sacramento State to consider courses taken at a school other than the home school, and have those courses count toward the degree at the home school. Units enrolled at another school and approved under the consortium agreement will be combined with the units at the home campus for consideration of federal and in certain state aid programs.

Additional Information:

- The Consortium Agreement program is provided to students by Sacramento State and not required by federal regulations. Each host campus *may* or *may not* participate in the Consortium Agreement program with Sacramento State
- A consortium agreement is available each semester and the student has the option to apply for a consortium each semester they concurrently enroll at another institution
- The student must be enrolled in at least half-time at Sacramento State (i.e., 6 units Undergrad, 4 units Graduate). Students enrolled in 12 units or more at Sacramento State are ineligible
- Courses for a double major, double concentration, or minor will not be considered if they are not required by the students primary academic program

**Semester Deadline
 Fall 2023 - September 22, 2023**

STEP 1. APPLICATION AND ADVISING – Complete this section with advisor(s)

Fall 2023 Enrolled Units: Sacramento State: _____ Host Campus: _____

Host Campus Name: _____

Course(s) at Host Campus	Course Title and Number	Units	Beginning & Ending Dates	Check <input checked="" type="checkbox"/> if for:	
				GE/GR	Major
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

CSUS Academic Certification:

In accordance with the above named student's education plan. I certify that the general course(s) and/or graduation requirements listed above will apply toward the completion of the student's degree objective at Sacramento State.

Print Name: _____ Signature: _____ Title: _____

Email Address: _____ Date: _____

CSUS Major Advisor Certification:

In accordance with the above named student's education plan. I certify that the major course(s) listed above will apply toward the completion of the student's degree objective at Sacramento State.

Print Name: _____ Signature: _____ Title: _____

Email Address: _____ Date: _____



California State University, Sacramento
 Student Service Center
 Financial Aid & Scholarships Office
 Lassen Hall
 6000 J Street, Sacramento, CA 95819-6044
 Phone: (916) 278-1000

Print Name: _____

Sac State ID #:

STEP 2. HOST CAMPUS CERTIFICATION OF AID

This section is to be completed by the Financial Aid & Scholarships Office at the Host campus.

The student: _____ is OR _____ is not receiving federal and/or state financial aid (excluding BOGG Waiver) at our institution.

Print Name: _____ Signature: _____ Title: _____
 Email Address: _____ Phone Number: _____ Date: _____

 Name of Institution _____ Street Address _____

STEP 3. CONSORTIUM TERMS AND CONDITIONS

- You are admitted in a degree program and enrolled in at least half-time at Sacramento State (wait list not counted)
- Course(s) at the host campus apply toward the degree objective at Sacramento State
- You must notify Sacramento State Financial Aid & Scholarships Office within 7 days of withdrawal from any course at the host campus. [Upload](#) proof of withdrawal (with date)
- Official academic transcripts must be provided to the Office of the Registrar within 30 days after the semester has ended
- A financial aid hold will be placed preventing disbursement of all aid in the following term until transcripts has been received by the University
- No substitutions/changes in courses at the host campus will be accepted once this consortium agreement has been submitted
- The Satisfactory Academic Progress policy applies to all course work under the consortium agreement

Student Certification:

I certify I understand the terms and conditions of the consortium agreement. I understand that failure to adhere to all conditions of this agreement may result in a denial of future request and/or loss of eligibility to participate in the program.

Student Signature: _____ Date: _____

STEP 4. SUBMIT THE CONSORTIUM AGREEMENT WITH A COPY OF FALL 2023 SEMESTER SCHEDULED FROM THE HOST CAMPUS.

Ensure your schedule lists your name, name of institution, course number, units and semester of enrollment

Upload completed financial aid documents at
<https://onbaseform.csus.edu/obforms/eforms/STDAF/DocumentSubmission/finaidupload.aspx>