

# Indiana University South Bend

Office of Financial Aid and Scholarships  
1700 Mishawaka Avenue  
P.O. Box 7111  
South Bend, IN 46634  
574-520-4357 / FAX: 574-520-5561

Consortium AGREEMENT  
IU Institution

2022-2023 Academic Year  
2023 Summer

IUSB will no longer transfer credit balances to the Host institution. Students will be responsible for paying any outstanding balance to the Host institution.

According to federal regulations, a Consortium Agreement must exist before a home institution can process an application for federal funds for students attending another institution. IU South Bend will be the Home institution/school only when another IU Institution/school is the Host\*. Therefore, the two institutions named below herein enter a Consortium Agreement for:

STUDENT'S NAME \_\_\_\_\_ UID \_\_\_\_\_

IU Home Institution \_\_\_\_\_ IU Host Institution \_\_\_\_\_

I agree to notify the IUSB Financial Aid Office of any changes in my enrollment at the Host Institution.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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### TO BE COMPLETED BY STUDENT'S IU SOUTH BEND ACADEMIC ADVISOR

The above named student is enrolling in the course(s) listed below at: \_\_\_\_\_  
(IU **Host** Institution/School)

**Note:** List course number (not section number) for the IU **HOST** Institution/School

\_\_\_\_\_ Course # \_\_\_\_\_ Course # \_\_\_\_\_ Course # \_\_\_\_\_ Course # \_\_\_\_\_ Course # \_\_\_\_\_ Course # \_\_\_\_\_

for a total of \_\_\_\_\_ credit hours during the \_\_\_\_\_ semester

I certify the course(s) listed will count toward the student's degree requirements and will be recorded on the student's IU transcript.

Academic Advisor's Printed Name \_\_\_\_\_ EXT \_\_\_\_\_ Date \_\_\_\_\_

Academic Advisor's Signature \_\_\_\_\_

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### FINANCIAL AID CERTIFICATION

IUSB institution **agrees** to provide payment(s) to the above named student for the term specified.

Student is enrolled in the above referenced courses as of \_\_\_\_\_.  
(Date)

Signature for Indiana University South Bend (Home Institution) \_\_\_\_\_

\*If there are extenuating circumstances that require you to pursue coursework at a non IU campus, please contact the Office of Financial Aid & Scholarships.