

## Return completed form and supporting docs to:

University of North Texas Student Financial Aid and Scholarships 1155 Union Circle #311370 Denton, TX 76203-5017

Or: Fax to 940.565.2738

Or: save as PDF and upload to the secured document

uploader: https://financialaid.unt.edu/upload

## 2023-2024 Concurrent Enrollment Agreement Instructions

COMPLETINGTHEFORM					
<ul> <li>□ Section A: Complete the requested student information.</li> <li>□ Section B: Provide the name and location of the HOST Institution and the dates you will be enrolled.</li> <li>□ Section C: Submit form to your UNT academic advisor to complete the requested information.</li> <li>□ Section D: Submit form to the Registrar's Office at your HOST Institution to complete the requested information.</li> <li>□ Section E: Submit form to the Financial Aid Office at your HOST Institution to complete the requested information.</li> <li>□ Section F: Attach proof that balance is paid in full or that payment arrangements have been made for classes listed in Section C that are being taken at the HOST Institution.</li> <li>□ Section G: Read, sign and date the certification.</li> </ul>					
SUBMITTINGTHE FORM					
Ensure the form is complete and the required documentation is attached.					
Return the form <b>and</b> required documentation to our office.					
PLEASE NOTE:					
You must be awarded a Federal Pell Grant to complete a Concurrent Enrollment Agreement.					
You must be enrolled in a minimum of 6 undergraduate hours at UNT.					

CEA forms will be processed after the census date for each term.

Allow up to 4 weeks for form to be processed.

Fall 2023 – CEA will NOT be accepted after **December 15, 2023**.

Spring 2024 – CEA will NOT be accepted after May 10, 2023.

Concurrent Enrollment Agreements are not processed during Summer terms.

Contractual hours will be placed on your class schedule as a placeholder for the hours being taken at your HOST school.

You must submit your transcripts from your HOST school to the UNT Registrar's Office at the completion of the term.



UNT AcademicDepartmentAdvisor'sNamePrinted:

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## 2023-2024 Concurrent Enrollment Agreement

SECTION A: STUDENT INFORMATION					
Name: UNT Assigned ID:					
Email Address: Telephone:					
SECTION B: HOST SCHOOL INFORMATION					
As allowed in Part 600.9, Student Assistance General Provisions, and Parts 590.1-590.83, Pell Grant Program, Code of Federal Regulations, this					
Consortium Agreement is entered into between the <b>HOME</b> institution, <b>THE UNIVERSITY OF NORTH TEXAS</b> in Denton, TX and the <b>HOST</b> Institution, for the purpose of providing federal assistance to the student named above.					
Host School:					
Location:					
Term: ☐ Fall 2023 Dates of Enrollment: From: To:					
□ Spring 2024					
SECTION C: UNT ACADEMIC ADVISOR – CERTIFICATION HOME INSTITUTION					
Degree Program:					
Approved CourseName(s) and Number(s) at Host Institution:					
Course Number:					
Is there a copy of a degree plan on file? Check one: $\square$ Yes $\square$ No  If no, has the student requested one to be filed? $\square$ Yes $\square$ No					
The above name student has permission to study at the above campus for the period stated.					
UNT Academic Department Advisor's Signature:Date:					

SECTION D: HOST	TINSTITUTION - R	REGISTRAR'S OFFICE (	CERTIFICATION			
Number of Enrolled	Credits:					
ThisConstitutes	FT 🗖	3/4	1/2 🗖	1/4 🗖		
Length of Period of E	Enrollment:	Weeks				
Dates of Enrollment:	From:		To:			
The Host Institution c	ation (May be comple certifies that the student in all the Federal Stude	is enrolled for the "Dates of	Enrollment" and the Hos	t Institution certifies that it is		
HOST Registrar or (F.	AO) Signature:					
Printed Name:		Title:		Date:		
Phone:		Email Address:				
SECTION E: HOST	INSTITUTION - F	INANCIAL AID OFFICE				
Average Estimated 7	Tuition only per Cred	it Hour: \$				
FA Non-Payment Ag	greement					
Guaranteed Student L	Loan during the "Dates		HOST Institution agrees	d Funds and that it will not certify a that, if aware, it will inform the		
HostFinancial AidOf	ficer Signature:					
Printed Name:		Title:	<del></del>	Date:		
Phone:		Email Address:				
SECTION F: PRO	OF OF PAYMENT					
		\$0 balance or proof of pay	yment arrangements for	or class(es) taken at the HOST		
Institution.	_	-	-	• .		
SECTION G: STU	DENT CERTIFICAT	CION				
	n before signing the fo					
	■ I understand I need to be enrolled in at least 6 hours undergraduate credit at UNT to be considered for concurrent financial aid					
	equested/filed a degree	plan at University of North	Γexas (UNT).			
•		l aid at the Host Institution.	,			
· ·	oof of payment made at					
		from the hours enrolled at the	e Host Institution.			
-	=	val will fall under the UNT po				
	will not receive financ	•	•	nic transcript is submitted to the		
Student Signature:				Date:		