

COMPLETINGTHEFORM

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

2020-2021 Concurrent Enrollment Agreement Instructions

	 Section A: Complete the requested student information. Section B: Provide the name and location of the HOST Institution and the dates you will be enrolled. Section C: Submit form to your UNT academic advisor to complete the requested information. Section D: Submit form to the 2nd floor of the UNT Registrar's Office to obtain signature. Section E: Submit form to the Registrar's Office at your HOST Institution to complete the requested information. Section F: Submit form to the Financial Aid Office at your HOST Institution to complete the 					
	requested information. Section G: 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 .					
	Section H: Read, sign and date the certification.					
SUBMI	TTINGTHE FORM					
	Ensure the form is complete and the required documentation is attached. Return the form and required documentation to our office.					
PLE	ASE 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	CEA forms will be processed after the census date for each term.					
Allov	Allow up to 4 weeks for form to be processed.					
Fall 2	Fall 2020 – CEA will NOT be accepted after December 4, 2020 .					
Sprin	g 2021 – CEA will NOT be accepted after April 30, 2021.					
Conc	urrent Enrollment Agreements are not processed during Summer terms.					
	ractual hours will be placed on your class schedule as a placeholder for the hours being taken ar HOST school.					
	must submit your transcripts from your HOST school to the UNT Registrar's Office at the letion of the term.					



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2020-2021 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 Assi Consortium Agreement is entered into	stance General Provisions, and Parts 590.1-590.83, Pell Grant Program, Code of Federal Regulation between the HOME institution, THE UNIVERSITY OF NORTH TEXAS in Denton, TX and tog federal assistance to the student named above.					
Host School:						
Location:						
Term: ☐ Fall 2020 ☐ Spring 2021	Dates of Enrollment: From: To:					
SECTION C: UNT ACADEMIC	C ADVISOR – CERTIFICATION HOME INSTITUTION					
Degree Program:						
Approved Course Name(s) and Nur	nber(s)atHostInstitution:					
Course Name:	Course Number:					
Is there a copy of a degree plan on f	•	l Yes □ No				
The above name student has permis	ssion to study at the above campus for the period stated.					
UNT Academic Department Advis	<u> </u>					
UNT Academic Department Advisor	or'sNamePrinted:					
SECTION D: UNT REGISTRA	AR'S OFFICE – CERTIFICATION HOME INSTITUTION					
	ees to accept as transfer credit satisfactory completed course(s) earned at the Host instituti	ion and				
University of North Texas Registra	ar Signature:					
Title:	Date:					

SECTION E: HOST	INSTITUTION - I	REGISTRAR'S OFFICE C	CERTIFICATION					
Number of Enrolled	Credits:							
This Constitutes	FT 🗖	3/4	1/2 🗖	1/4 🔲				
Length of Period of B	Enrollment:	Weeks						
Dates of Enrollment:	From:		To:					
The Host Institution c	ation (Maybe comple certifies that the student in all the Federal Studen	t is enrolled for the "Dates of I	Enrollment" and the Ho	st Institution certifies that it is				
HOST Registrar or (F	AO) Signature:							
Printed Name:		Title:		Date:				
Phone:		Email Address:						
SECTION F: HOST	INSTITUTION - F	INANCIAL AID OFFICE						
Average Estimated 7	Tuition only per Cred	it Hour: \$						
FA Non-Payment Ag								
Guaranteed Student L	oan during the "Dates		HOST Institution agree	ed Funds and that it will not certify a s that, if aware, it will inform the				
Host Financial Aid Of	ficer Signature:							
Printed Name:		Title:		Date:				
Phone:		Email Address:						
SECTION G: PRO	OF OF PAYMENT							
☐ Attach proof of I Institution.	payment showing a	\$0 balance or proof of pay	ment arrangements	for class(es) taken at the HOST				
SECTIONH: STUI	DENT CERTIFICAT	CION						
Please read each iter	n before signing the fo	orm.						
 I understand I ne eligibility. 	■ I understand I need to be enrolled in at least 6 hours undergraduate credit at UNT to be considered for concurrent financial aid							
 I certify I have re 								
■ I certify I will not be receiving financial aid at the Host Institution.								
 I will provide pro 	oof of payment made a	t the Host Institution.						
■ I will notify UN	Γ if I drop or withdraw	from the hours enrolled at the	e Host Institution.					
		wal will fall under the UNT po						
	will not receive financ		=	mic transcript is submitted to the				
Student Signature:				Date:				