

LOYOLA UNIVERSITY NEW ORLEANS
CONTRACTUAL AGREEMENT TO STUDY ABROAD
FOR THE _____ / _____ AWARD YEAR

In order to receive Title IV Financial Assistance funding through Loyola University New Orleans under this Contractual Agreement, the student is required to complete Section I of this form, route it to the proper parties at the school/program the student will be visiting for completion of Section II, and have it returned to Scholarships and Financial Aid at Loyola University New Orleans. Once all sections of this Agreement are completed, the student and host institution will receive copies of this form. **The student is responsible for following up with all parties to insure that the Contractual Agreement is completed in a timely manner.**

Section I: To be completed by student

Name: _____ Social Security Number: _____
Home Address: _____ Home Phone: _____
City: _____ State: _____ Zip: _____ Campus Phone: _____
E-mail address: _____ Dates at Host Institution: _____ to _____
Host Institution/Program: _____
Location: _____

Statement of Authorization:

I agree to:

- Submit this form to Loyola University and to my Host Institution for completion.
- Inform Loyola University immediately if I choose not to enroll or otherwise cancel my participation in this program.
- Allow Loyola University New Orleans and my Host Institution to share information relating to my enrollment and financial aid eligibility.
- Enroll in a full course of study.

I understand that:

- My academic dean must approve the courses to be taken at this program for credit towards my degree at Loyola University New Orleans on the "Request for Approval to Study Abroad on a non-Loyola Program."
- Any balance currently owed Loyola University New Orleans must be satisfied prior to any financial aid funds being released.
- I am responsible for all payments due to my Host Institution.

Student Signature: _____ Date: _____

Section II: To be completed by Host Institution/Program

Number of Enrolled Credit Hours: _____
Cost of Attendance:
Tuition & Fees: _____
Room and Board: _____
Books & Supplies: _____
Travel Allowance: _____
Personal Living Allowance: _____
Special Expenses: _____
(Provide Explanation)
Total: _____

The Host Institution/Program:

- Certifies student is accepted for enrollment.
- Agrees not to process or award any Federal Title IV aid for this student.
- Agrees to notify the Loyola University New Orleans within 14 calendar days if the student withdraws from the program or decreases enrollment below half-time before its conclusion.
- Agrees to notify Loyola University New Orleans of student aid that the student receives from non-Loyola sources.
- Agrees to provide a transcript of the student's academic record to Loyola University New Orleans.

Printed Name		Title	
Address		City	State Zip
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Phone	Fax	E-mail Address	
Authorized Signature		Date	

Section III: To be completed by Loyola University New Orleans

Award Name

Amount

Total Aid Eligibility:

Loyola University New Orleans agrees to:

- Consider this student enrolled in an eligible program of study at the host institution.
- Determine eligibility for financial aid based on the cost of attendance at the host institution.
- Maintain all records in accordance with federal regulations.

Printed Name

Title

Address

City

State

Zip

E-mail Address

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Phone

Fax

Authorized Signature

Date