



Return to: Office of Scholarships and Financial Aid
 Box 7302, 2016 Harris Hall
 Raleigh, NC 27695-7302
 Phone: (919) 515-2421
 Fax: (919) 515-8422
 Email: financialaid@ncsu.edu

STUDY ABROAD ENROLLMENT AGREEMENT

Student Name	Student ID#
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Program Information:			
<p>The Financial Aid Enrollment Agreement is required from students who are completing classes abroad, whether the classes are provided by NCSU faculty or a host institution. Although there is no deadline, the Agreement should be completed as soon as possible after confirming the abroad experience with the Study Abroad Office. Ideally, the Agreement should be completed at least 3 weeks prior to departure.</p>			
<p>Program Name: _____ Program Type (check one):</p> <div style="float: right;"> <input type="checkbox"/> Direct Enroll <input type="checkbox"/> Exchange <input type="checkbox"/> Set Program Cost (i.e. Prague) </div>			
<p>Term, Year, # of credits to transfer back to your <i>currently declared NC State Degree</i>, & Class Start Date at Host Institution (check/complete all that apply):</p>			
<i>Semester</i>	<i>Year</i>	<i># of transfer credits</i>	<i>Class Start Date</i>
<input type="checkbox"/> Fall	_____	_____	_____
<input type="checkbox"/> Spring	_____	_____	_____
<input type="checkbox"/> Summer 1	_____	_____	_____
<input type="checkbox"/> Summer 2	_____	_____	_____

Student Information:	
<p>My signature below confirms that:</p> <ul style="list-style-type: none"> • I have read and understand all information contained on this form, my responses are accurate and I have shared this information with my parents if I am a dependent student. • I will notify the Office of Scholarships and Financial Aid if I withdraw, reduce my course load, or otherwise deviate from my original, advisor-approved enrollment plan. I understand that any change in my enrollment may require repayment of all or a portion of funds already disbursed to me, potentially resulting in a balance owed to the university. • I understand the Satisfactory Academic Progress policy (go.ncsu.edu/academicprogress) applies to me and my courses while abroad, just as it does when I am at my home institution. • I understand that financial aid funds only those courses required for my NC State degree program and that transferred hours will be evaluated after the university's receipt of my transcript. If it is determined that I received aid for courses that do not count toward my NC State degree program, my award will be reduced and funds returned to the appropriate source, potentially resulting in a balance owed to the university. (If enrolled full time, at least 12 credit hours per term must count toward degree program to avoid aid reduction.) • I understand that my financial aid will disburse: <ul style="list-style-type: none"> ○ Fall or spring: during the first week of NCSU classes. ○ Summer terms: no earlier than 3 days after the beginning of the NCSU summer term applicable to the students program abroad. • I understand that funds are generally available within 10 days after disbursement (for those with direct deposit). • I understand I should set up direct deposit to receive any applicable refund as quickly as possible. <p style="text-align: center; margin-top: 10px;"><i>Failure to comply with all stipulations stated may jeopardize my eligibility to receive future financial aid funds.</i></p>	
_____ Student's Signature	_____ Date

Academic Advisor's Certification:		
<p>My signature below confirms that I have approved the number of credits noted above to be completed as part of the study abroad experience and will satisfy NC State degree requirements. Barring any change to this enrollment plan, credits successfully completed will apply to the student's currently declared NC State degree. I have confirmed that the student understands it is his/her responsibility to communicate to the Study Abroad Office and the Office of Scholarships and Financial Aid any subsequent alterations to this enrollment plan.</p>		
_____ Printed Name of Advisor	_____ Phone	_____ Email
_____ Advisor's Signature	_____ Date	_____ Title/Department