WILLIAM & MARY STUDY ABROAD CONSORTIUM AGREEMENT

All students receiving financial aid (including grants, scholarships, and/or loans) need to complete this form and return it to the Global Education Office (G.E.O.) at the Reves Center. Please see the Study Abroad Student Handbook for more information. You will need to make sure with your financial aid counselor that your financial aid paperwork is complete. Email aid@wm.edu to connect with your advisor.

SECTION 1: COMPLETED BY STUDENT AND RETURNED TO G.E.O. AT THE REVES CENTER (G.E.O. WILL SEND THE FORM TO THE PROGRAM/HOST UNIVERSITY)	SECTION 2: TO BE COMPLETED BY THE PROGRAM FINANCIAL AID OFFICER, AND RETURNED TO G.E.	.O. AT THE REVES CENTER
STUDENT INFORMATION	WILLIAM & MARY AND	
93 #		
First Name		
Middle Name	Handbook.	
Last Name	Period of Enrollment (mm/dd/yy): Estimated Cost of the Study Abroad Program:	to U.S. Dollars OR Local Currency
Phone #	TUITION & FEES	0.3. Donais On Edea Currency
W&M EMAIL	ROOM & BOARD (ON-CAMPUS OR OFF-CAMPUS)	
	ESTIMATED AIRFARE	
@EMAIL.WM.EDU	BOOKS & SUPPLIES	
PROGRAM INFORMATION	MISCELLANEOUS/PERSONAL	
Program Name	OTHER INSURANCE	
	REQUIRED W&M CISI INSURANCE (W&M REVES USE ONLY)	
Host University	REVES CENTER FEE (W&M REVES USE ONLY)	N/A
	TOTAL COST OF THE STUDY ABROAD PROGRAM FOR THE SPECIFIED TERM OF ATTENDANCE	
Term Abroad	INDICATE THE AMOUNT OF ANY SCHOLARSHIPS YOUR PROGRAM WILL PROVIDE TO THIS STUDENT	
PROGRAM/HOST UNIVERSITY	CHECK HERE IF ATTACHING SEPARATE COST BREAKDOWN SHEET BY COMPLETING THIS AGREEMENT, THE VISITED CAMPUS AND WILLIAM & MARY AGREE THAT: (1) THE HOST CAMPUS CERTIFIES THAT THE STUDENT IS ENROLLED FULL-TIME (AT LEAST 12 CREDIT HOURS PER SEMESTER, 6 CREDIT HOURS PER SUMMER TERM), WILL MONITOR THE STUDENT'S ENROLLMENT AND WILL NOTIFY WILLIAM & MARY IF THE STUDENT DROPS BELOW FULL-TIME STATUS DURING THE PERIOD OF	
CONTACT NAME		
AND PHONE #, Fax #, AND/OR		
Email Address		
	STUDY. (2) THE HOST CAMPUS WILL NOT PROCESS OR DURING THE PERIOD OF THIS AGREEMENT. (3) WILLIAI	
I understand that the 930# and W&M e-mail address	MONITOR SATISFACTORY ACADEMIC PROGRESS. (4) WILL	liam & Mary will accept responsibility for
listed will be sent to the program/university I have listed.	PROCESSING AND DISBURSING FEDERAL PELL GRAN GRANTS, FEDERAL STAFFORD AND PLUS LOAN(S),	AND ALTERNATIVE LOAN(S) THE STUDENT MAY
I understand it is my responsibility to make sure the	BE ELIGIBLE FOR. (5) ACCEPTANCE OF TRANSFER CREDIT OF THE STUDENT'S COURSE OF STUDY AND ITS APPROVAL	is contingent upon successful completion by $W\&M$.
proper institution receives payment for the program I have	Signature of Study Abroad/Financial Aid Officer:	
chosen to attend.	Printed Name:	
STUDENT SIGNATURE:	Title/Office:	
	Organization/Host University Name & Address:	
D		
Date:		
	—————————————————————————————————————	
REVES CENTER G.E.O. USE ONLY	E-mail:	

CHECKED BY (INITIALS):

RETURN VIA EMAIL (wmabroad@wm.edu) or FAX (1-757-221-3597)

GLOBAL EDUCATION OFFICE, REVES CENTER P.O. BOX 8795 WILLIAMSBURG, VA, USA 23187-8795 PHONE: (757) 221-3594 FAX: (757) 221-3597 EMAIL: WMABROAD@WM.EDU