



PROCESSING INSTRUCTIONS FOR TRANSIENT STUDENTS

A Transient Student:

1. Has been admitted to a degree seeking program at Augusta University (HOME institution).
2. Has historically attended AU as his or her primary institution of higher education.
3. Is scheduled to receive financial aid from AU.
4. For a particular term (or terms), wishes to attend another HOST institution as a transient student and receive federal financial aid from AU under a Consortium Agreement and/or receive the HOPE or Zell Miller Scholarship if attending another HOPE eligible institution.

Below are the steps that must be followed in order to receive your financial aid as a transient student:

1. Read, initial and sign the attached Intent for Transient Study form. It is strongly advised that you make a copy of this document for your own records.
2. Return the **Intent for Transient Study** form to the AU Office of Student Financial Aid along with the items listed below. Please do NOT submit the Statement of Intent for Transient Study without ALL of the items listed. Incomplete documentation will be returned to the student unprocessed.
 - *A copy of your completed **Transient Permission Form** documenting approval by the AU Registrar's Office. This form may be obtained in the Registrar's Office or online at the Registrar's Office website.*
 - *A copy of your **class schedule from the HOST Institution**.*
3. Upon receipt of the above (3) items and assuming the student meets the qualifying criteria to receive federal financial aid for consortium study, the AU OSFA will send the HOST institution a Consortium Agreement. For HOPE/Zell Miller Scholarship recipients, we will process the HOPE Transient Certificate online once eligibility is confirmed.
4. After the end of the add/drop or schedule adjustment period at the HOST institution, a financial aid office representative from the HOST institution will complete and sign the Consortium Agreement and send it back to the AU OSFA.
5. Upon receipt of the Consortium Agreement and enrollment verification from the HOST institution, the AU OSFA will process and disburse your financial aid.

PLEASE NOTE: **Most HOST institutions will require you to pay their tuition and fees out of pocket.** You will be reimbursed (if eligible) by your financial aid award. The combined hours of enrollment (between both HOME and HOST institutions) and type of financial aid award determine the amount your federal financial aid award. Your award may or may not be increased based on your enrollment at the HOST institution. HOPE is awarded at each institution based on the number of hours attempted at that institution, not to exceed a total of 15 hours.



Intent for Transient Study

Student Name (Printed)

Student ID #

AU Email Address

Please indicate the term and year for which you are requesting Transient Study:

Fall _____ Spring _____ Summer _____

Will you also attend AU during the semester indicated above? ___YES ___NO: How many hours? _____

Indicate if you receive any of the following types of aid: Pell Grant Loans HOPE/Zell

Name of HOST Institution: _____

HOST Financial Aid Office Contact Information: (Must be provided by student)

Street Address

Phone Number

Building/Room Number

Fax Number

City, State, Zip

E-Mail Address

Terms and Conditions of Transient Study

Please read and initial each item to signify that you understand and comply with each criteria.

- ___ I am a degree-seeking student at AU.
- ___ I am registered for the approved courses appearing on the attached Transient Permission Form.
- ___ I understand that I am required to pay tuition and fees for the HOST institution out of pocket. (Exceptions may apply for HOPE recipients attending another HOPE eligible institution.
- ___ I understand that in order to receive financial aid for enrollment at the HOST institution and/or AU, I MUST be making Satisfactory Academic Progress (<http://www.augusta.edu/finaidbrochuresforms.php>).
- ___ I understand that I am responsible for ensuring the HOST institution sends my official transcript to the AU Registrar's Office upon completion of the consortium period.
- ___ I understand that I may be required to repay certain financial aid awards should I drop or withdraw from my courses at the HOST institution (or AU).
- ___ I have carefully read the Processing Instructions for Transient Students on the first page of this packet.

Student Signature

Date