

**SAINT LOUIS UNIVERSITY PETITION TO ESTABLISH
A FINANCIAL AID CONSORTIUM AGREEMENT**

Step #1: Complete each numbered item on this petition. Any omissions will retard the processing of this petition.

Step #2: Secure your Dean's signature.

Step #3: Sign and date this petition and submit to the Office of Student Financial Services, DuBourg Hall, Room 121

STUDENT INFORMATION

1. Name: _____ 2. Social Security # _____
 3. Local Address: _____
 Street City State Zip
 4. Permanent Address: _____
 Street City State Zip
 5. Local Phone #: _____ 6. Permanent Phone #: _____
 7. SLU Academic major: _____ 8. SLU Academic Minor _____
 9. SLU School/College of Enrollment: _____
 10. Are you currently receiving any scholarships/financial aid at Saint Louis University? **YES** **NO**
 If yes, please list: _____

STUDY-AWAY PROGRAM/INSTITUTION INFORMATION

11. Name of Program: _____
 12. Sponsoring Institution (e.g. college, university, agency, etc.): _____
 13. Sponsor Address: _____
 Street City State Zip
 14. Phone #: _____ 15. Sponsor Country: _____
 16. Financial Aid Contact at Sponsoring Institution: _____
 Name Email
 17. Address: _____
 Street City State Zip
 18. Study-away Enrollment Dates:
 Start: _____ End: _____

19. Study-away Courses & SLU Equivalents:

Title of Study-away course(s) (Attach official course description(s))	# of hours per week	# of weeks per semester/term	Satisfies which SLU course (List SLU equivalent, if any)	Amount of SLU credit

SIGNATURES: IMPORTANT, PLEASE READ CAREFULLY

Student's signature: I attest by my signature that all information is true and accurate. I understand that the final determination regarding the University's validation and acceptance of my study-away course work requires my submission of an official academic transcript of my work at the above named institution.

Student's Signature: _____ **Date:** _____

Dean's Signature: My signature attests that I approve of the academic merit of this study-away experience/course work and its transferability to this student's University degree program requirements.

Dean's Signature: _____ **Date:** _____