2017-2018 Financial Aid Concurrent Enrollment

The federal financial aid law states that "The enrollment status of a student attending more than one school under a consortium agreement is based on all the courses taken that apply to the degree or certificate at the home institution." A student may not receive Federal financial aid funds for enrollment at two schools during the same enrollment period.

This form is used to verify enrollment at another non-CSU college or university while attending and receiving financial aid from California State University, San Bernardino (CSUSB).   This form is ONLY used to increase Pell Grant payments or Cal Grant B Access Grant stipends for students who are enrolled in a minimum of six (6) units at CSUSB.

Eligibility

1. Must be a regularly admitted (CSUSB) student.
2. Must be enrolled in six (6) units or more at CSUSB to be eligible for financial aid based on concurrent enrollment at another college or university.

Terms

1. Funds for additional units will be paid after the CSUSB quarterly add/drop period (Approximately the third week of the quarter).
2. Units completed at the non-CSU institution will be added to CSUSB units for disbursement purposes.
3. Your units will be computed as follows: 1 semester unit equals 1.5 quarter units.
4. Satisfactory academic progress standards must be met. Refer to Satisfactory Academic Progress under "Apply for Aid" at the top of the Financial Aid web page (http://finaid.csusb.edu).
5. Official academic transcripts must be submitted to Registrar's Office after coursework is completed.

Procedures

1. Student completes Part I of the "CSUSB Financial Aid Concurrent Enrollment" form. Student attaches the following documents to the form:
    a. Copy of the approved "Concurrent Enrollment for Equivalent Transfer Course(s)" from the CSUSB Office of Records, Registration and
    b. An official enrollment verification from the non-CSU school you are attending
2. Part II is completed by the non-CSU institution's financial aid office.
3. CSUSB Office of Financial Aid reviews this form to determine the student's eligibility for additional funds.
4. If eligible for additional funds, the student's account will be credited after census (quarterly add/drop period).

NOTE: This form is not used for concurrent or visitor enrollment on another CSU (California State University) campus.

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO

Office of Financial
Aid and Scholarships

2017-2018 Financial Aid Concurrent Enrollment

Section 1: To be completed by the CSUSB Student

Student Name: _____   **Coyote ID:** _____

Non-CSU Concurrent Institution: _____

Number of Units in which you are enrolled at the non-CSU concurrent institution: _____

Term you are enrolled at non-CSU concurrent institution: Term: _____   Year: _____

CSUSB Term to which you wish to have the Units applied: Term: _____   Year: _____

Initial each item:

_____   I am a regularly admitted (CSUSB) student.

_____   I understand that additional funds will be paid after the CSUSB quarterly add/drop period.

_____   I understand the Satisfactory Academic Progress policy must be met.

_____   I understand that I must submit official academic transcripts to the Registrar Office at CSUSB.

_____   I understand that I must be enrolled in a minimum of 6 units at CSUSB and will notify CSUSB
Office of Financial Aid & Scholarships of any enrollment changes.

Section 2: Additional Documentation Required

_____   Official Enrollment Verification from the Concurrent Institution.

_____   Approved CSUSB "Concurrent Enrollment for Equivalent Transfer Course(s)" form.

Student Signature: _____ Date**:** _____

Section 3: To be completed by the non-CSU Concurrent Institution Financial Aid Staff:

I certify that the student referenced above is enrolled in the courses referenced above.

Is student receiving federal or state financial aid (excluding BOGG grants) from this institution: Yes   No

Concurrent Institution Official's Signature _____

Print Concurrent Institution Official's Name, Title and Telephone Number:

Name _____

Title _____**Phone Number** _____