CONSORTIUM / CONTRACTUAL AGREEMENT
FOR STUDY AWAY / EXCHANGE PROGRAMS

This agreement provides the basis required by federal regulations for Franklin W. Olin College of Engineering (home institution) to process financial aid for a student matriculated at Franklin W. Olin College of Engineering, but studying at another college or university (host institution) for a semester or an academic year. It also provides necessary information for Olin College Student Accounts to make a tuition payment on your behalf. All other fees and costs for the program must be paid by the student directly to the Host Institution. Your Study Away Application is not complete until this form is submitted.

I have read and understand my financial responsibilities regarding the Study Away Program. I will provide a copy of the bill received by the Host Institution to the STAR Center for remittance of the tuition payment on my behalf.

<table>
<thead>
<tr>
<th>Student’s Name (please print)</th>
<th>Student’s Signature</th>
<th>Date</th>
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PART I – HOST INSTITUTION

The host institution agrees to provide a transcript of the student’s academic record to Olin College upon the request of the student. The host institution assumes responsibility for monitoring student enrollment, and further agrees to notify Olin College in writing immediately if the student withdraws or otherwise changes the enrollment as indicated below. The host institution also agrees that all financial assistance will be processed by the home institution.

Host institution: _______________________

Has the institution ever participated in the Federal Student Aid (FSA) Programs? Y N

Federal Title IV School Code: _____________________________ (if not applicable please indicate as such)

Student’s expected enrollment status: ☐ full-time ☐ half-time ☐ less than half-time

Student’s Expenses:

(Please provide figures in U.S. dollars. For those expenses not billed directly, please provide estimates.)

Exchange rate used: ___________

Tuition $__________ (n/a if Direct Exchange)

Fees $__________

Room and Board $__________

Books: $__________

Personal: $__________

Transportation: $__________

Other: $__________

TOTAL: $__________

Contact Information for tuition payment on the student’s behalf:
Franklin W. Olin College of Engineering
Loretta Dinon, Student Accounts Manager
Student Accounts and Records Center
Olin Way
Needham, MA 02492 USA
Email address: loretta.dinon@olin.edu
Please provide the mailing address / contact person for sending final agreement and payments:
______________________________________________________________
______________________________________________________________
______________________________________________________________
Contact:_________________________________ Telephone:________________________
Fax:_________________________ E-mail address:_____________________________

Signature of person completing form ___________________________ Date ___________________________

Title ______________________________________________________________________________________________

PART II – STUDY AWAY COORDINATOR, OLIN COLLEGE

Franklin W. Olin College of Engineering agrees to have _______________________________ (host institution) provide a portion of the Olin College educational program to ___________________________ (student) for the period of ________________ (academic term). Olin College also agrees to accept, assuming prior approval, satisfactory work undertaken at the host institution toward completion of Olin College degree requirements.

Please circle one: Direct Exchange Pre-Approved/Student Designed

Signature ___________________________ Date ___________________________

PART III – FINANCIAL AID OFFICE, OLIN COLLEGE

Olin College estimates eligibility for the following aid based on the enrollment status and costs provided by the host institution. Funds will be posted to the Olin Student Account after the start of the applicable term. Any eligible refund will be sent to the student.

Estimates of Financial Aid

$___________ Federal Pell Grant $___________ Institutional Scholarships

$___________ Federal SEOG $___________ Institutional Need Based Grants

$___________ Federal Direct Loan $___________ Other

Financial Aid Administrator ___________________________ Date ___________________________

Jean.ricker@olin.edu