



RETURN TO:
 Office of Financial Aid & Scholarships
 Cal Poly Pomona
 3801 W Temple Ave
 Pomona, CA 9176804008
 (909) 869-3700 (Phone)
 (909) 869-4757 (Fax)

Name of Financial Aid Applicant (please print)

 Last First Middle

Bronco Number:

Email Address: _____

CROSS - ENROLLMENT / CONSORTIUM AGREEMENT

Part I: TO BE COMPLETED BY STUDENT

Name of other institution _____ Amt. of Cal Poly units: _____

Academic year: _____ (check one) Quarter or Semester system.

Note: Because of overlap in the academic terms of campuses on semester and quarter calendars, cross-enrollment is possible only in the following combinations:

Other Institution's Course(s)	Units	Units taken at other institution for the following terms: (check one)	Units count at Cal Poly Pomona for the following Quarter: (check one)
_____	_____	Fall Semester/Quarter	Fall Quarter
_____	_____	Winter Quarter	Winter Quarter
_____	_____	Spring Semester/Quarter	Winter Quarter or Spring Quarter
_____	_____	Summer Quarter	Summer Quarter

Part II: TO BE COMPLETED BY OTHER INSTITUTION'S COUNSELING CENTER

I certify the course(s) listed in Part 1 are baccalaureate level—CSU transferable to Cal Poly Pomona.

Name: _____ Title: _____
 (Print or Type)

Telephone: _____

Signature: _____ Date: _____

Part III: TO BE COMPLETED BY OTHER INSTITUTION'S FINANCIAL AID OFFICE

Student has has not been awarded financial aid for the _____ academic year. If awarded, please list aid types below:

Sources of Assistance:	Amount:	
Pell Grant	Scheduled Amt:	Disbursed Amt:

Part IV: TO BE COMPLETED BY CAL POLY POMONA EOP/EES OFFICE (EOP/EES Students Only)

Student has been approved for EOP grant for the following quarter of cross enrollment:

(Circle one) Fall Winter Spring Summer Academic Year: _____

Name: _____ Signature: _____ Date: _____

CAL POLY POMONA Office Use:	
Processed by: (date & initial) _____	Login: (date & initial) _____

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Eligibility

1. Must be a regularly admitted Cal Poly Pomona student.
2. **Must be enrolled in six (6) units or more at Cal Poly Pomona to be eligible for funds other than Pell grant.**
3. EOP students must obtain approval from the Educational Opportunity Program at Cal Poly Pomona to be enrolled at Cal Poly Pomona with less than 12 units. (Please see an EOP Advisor for assistance). This approval must be obtained BEFORE submitting this form to the Office of Financial Aid.

Note: Your cross-enrollment units cannot be applied to loan certifications or deferments.

Terms

1. Funds for additional units will be paid after the Cal Poly Pomona quarterly add/drop period. (Approximately the fourth week of the quarter).
 2. Units completed at the other institution will be added to Cal Poly Pomona 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 "How to Maintain Academic Progress," available at the Financial Aid counter.
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Process

1. Student completes Part I.
2. Other institution's counseling center completes Part II.
3. Other institution's financial aid office completes Part III.
4. If you are an EOP student, your Cal Poly Pomona EOP advisor completes Part IV.
5. The Office of Financial Aid reviews this form to determine the student's eligibility for additional funds.
6. If eligible for additional funds, the student's account will be credited with those funds.