**UNIVERSITY OF ILLINOIS AT CHICAGO – Office of Student Financial Aid and Scholarships**
1200 W. Harrison Street, M/C 334 -- Chicago, Illinois 60607-7163 -- Phone: (312) 996-3126

# 2021-2022 Study Abroad Agreement Form

## Section A – Student Information (Please print clearly)

Last Name First Name M.I. Email

Street Address City State Zip Code

Study Abroad Program Name Dates City Country Name of UIC Study Abroad Advisor/ E-Mail

***Program Term*** :_____ (Fall 21, Spring 22, or Summer 22) ***Number of Credit Hours for Study Abroad Program***: _____

This form is to be completed by students who are enrolled in a study abroad or exchange program sponsored by the UIC Study Abroad Office and wish to request financial aid for his/her semester or year abroad. A student planning to participate in a Study Abroad program that has no affiliation with UIC is not eligible to receive Financial Aid. There must be a written agreement between UIC and the abroad program/institution. You must also complete a 2021-2022 FAFSA (https://studentaid.gov/h/apply-for-aid/fafsa) and submit all required documents by March 1 for summer, June 1 for fall, and October 1 for spring.

## Section B – Study Abroad Student Agreement & Signature

- □ I certify that I will enroll for courses abroad that will be accepted as academic credit earned towards my graduation from UIC. Credit earned must be at least a letter grade of D.
- □ I certify that I am enrolled in a degree seeking program and have not already fulfilled my graduation requirements.
- □ I will notify UIC Study Abroad Office and Student Financial Aid and Scholarships promptly if I withdraw from my course(s) or change my enrollment or courses. I understand that such actions will affect my financial aid eligibility resulting in my student account at UIC being billed for the aid which I am no longer eligible to receive. This can occur even after I have returned from abroad or graduated depending on the time it takes for my transcripts to be received.
- □ I understand that I am responsible for submitting an official academic transcript to the UIC Study Abroad Office immediately after my semester abroad ends or my aid will be affected.
- □ I understand that I must meet enrollment requirements to be eligible for federal, state, and institutional aid programs. For private scholarships, please check with the awarding agency for their enrollment policy.
- □ I understand that I am responsible for submitting the study abroad/exchange program course approval form to the Study Abroad Office prior to my departure.
- □ I understand that I am responsible to pay all charges associated with the study abroad program. Financial Aid will disburse to my UIC Student Account (if eligible), and I am responsible to pay the abroad program directly, once I receive my refund.
- □ I understand that I must meet Satisfactory Academic Progress (SAP) to be eligible for financial aid. The detailed SAP Policy is available at: https://docs.financialaid.uic.edu/docs/SAP_Policy.pdf
- □ **For MAP recipient students:**
  **I understand that at any time if I receive the MAP Grant, the UIC Study Abroad Office will default my enrollment to 15 credit hours at UIC for fall/spring. MAP disbursement is based on enrollment and will disburse for the maximum amount at 15+ credit hours. If the transcript from abroad has less credit hours than the 15 default credit hours registered for at UIC, I will be billed back by UIC on a per credit hour basis. It is my responsibility to contact the Office of Student Financial Aid and Scholarships for the amount of MAP Grant funds I will be required to give back after my transcript is processed by the UIC Study Abroad Office, if I earn less than 15 approved credit hours.**

**PLEASE NOTE**: Approval of this agreement is not automatic or guaranteed. Alternative Loans (which are subject to credit check approval) may be the only financial aid options available. I have read and I agree with the terms and conditions listed above. I understand that if I do not meet the requirements, I may not be eligible to receive Federal, Institutional, or State funds to pay for my abroad expenses.

_____

**Student Signature** **Date**

ENTER YOUR 9-DIGIT **UIN** →

**2122** **ABRS-E** **B**

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |