**Federal Financial Aid Co-Enrollment Form**  
Nebraska State and Community Colleges

**Please allow two weeks for processing for summer**  
**We will begin processing Fall 2019 forms on July 1***

<table>
<thead>
<tr>
<th>TERM</th>
<th>EARLIEST DATE TO SUBMIT</th>
<th>DEADLINE</th>
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</thead>
<tbody>
<tr>
<td>Summer 2019</td>
<td>April 2, 2019</td>
<td>May 3, 2019</td>
</tr>
<tr>
<td>Fall 2019</td>
<td>April 2, 2019</td>
<td>August 30, 2019</td>
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<tr>
<td>Spring 2020</td>
<td>October 28, 2019</td>
<td>January 17, 2020</td>
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Student’s Name ____________________________

Student’s NU ID ___________ Student’s Co-Enrolled Campus ID ___________

☐ **Summer 2019** ☐ **Fall 2019** ☐ **Spring 2020**

Please indicate your host institution below. *If the institution you plan to attend is not listed on this form, contact the Office of Financial Aid at UNK at 308-865-8520 or at finaid1@unk.edu.*

<table>
<thead>
<tr>
<th>Host Institution 1</th>
<th>Host Institution 2</th>
<th>Host Institution 3</th>
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<tbody>
<tr>
<td>CCC—Hastings</td>
<td>Chadron State College</td>
<td>Mid-Plains—McCook</td>
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<tr>
<td>CCC—Columbus</td>
<td>Peru State College</td>
<td>Mid-Plains—North Platte</td>
</tr>
<tr>
<td>CCC—Grand Island</td>
<td>Wayne State College</td>
<td>Northeast CC</td>
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<tr>
<td>CCC—Kearney</td>
<td>Metro CC (Omaha)</td>
<td>Southeast CC</td>
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</tbody>
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**SECTION A- To be completed by the student** (Completion of Section A&B are student’s responsibility)  
**Incomplete sections will not be processed and will be returned to the student.**

Reason classes at Host Institution cannot be taken at UNK?

The course(s) I will be taking at the Host institution:

<table>
<thead>
<tr>
<th>Course Code</th>
<th># of Credit Hours**</th>
<th>Course Name</th>
<th>Beginning Date</th>
<th>Ending Date</th>
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<tbody>
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Memorial Student Affairs Building / 2510 11th Ave. / Kearney, NE 68849—23850  
308-865-8520 / FAX 308-865-8096 / finaid1@unk.edu

Page 1 of 2
SECTION A - To be completed by the student (continued from first page)
To be co-enrolled with the University of Nebraska at Kearney (home institution) and another school (host institution) I (the student) agree to:

- Be admitted to and enrolled as a degree seeking student at UNK and are applying for financial aid.
- Be enrolled in one or more courses at UNK
- The course I am taking at the host institution applies toward my UNK or pre-professional degree
- Be in good academic standing at UNK and maintain satisfactory academic progress. My progress at the host school is used in determining my academic progress at UNK. At the end of each semester the Financial Aid Office will request my grades from the host school and review them in conjunction with my UNK grades to be sure I am meeting the UNK SAP standards.
- **Understanding that UNK awards financial aid based on the UNK equivalent hours. This means the Financial Aid Office will base my aid on how many credit hours will transfer to UNK, and not necessarily the actual credit hours at the host school.
- IMMEDIATELY notify the UNK Financial Aid Office if I drop hours at the host school during their “free drop” or “drop and add” period. If I fail to do this at the time I drop the class it will be reported when grades are requested at the end of the semester. I am not entitled to aid for classes I never participated in. UNK will retroactively cancel aid I am not entitled to, and I will be required to repay the aid to UNK. If I withdraw from all classes at both UNK and my host school, a portion of my aid may be returned to the federal programs.

By signing below I certify that I have read the UNK Co-Enrollment Policy and agree to all the requirements.

__________________________
Student Signature (Digital signature cannot be accepted)  Date

SECTION B - To be provided by student to UNK Academic Advisor for completion.

I ___________________ (advisor) certify that the courses listed on this form are required for this student to complete his/her degree at the University of Nebraska at Kearney. The courses listed to be taken at the Host institution are recognized by and transferable to UNK.

Reason classes cannot be taken at UNK.

☐ Classes are full at UNK  ☐ Classes are not offered at UNK for the requested semester
☐ Classes are being offered online  ☐ Classes better fit with degree/career objective
☐ Other (please describe): ____________________________

__________________________
Advisor’s Signature  Date

__________________________
Advisor’s UNK Email Address  Advisor’s Phone Number

SECTION C - To be provided by the student to the Office of Financial Aid at the Host Institution

The above-named student is enrolled at our institution in the courses listed on page 1 of this form
This represents a total of _____ credit hours.
Tuition/Fees: $__________  Enrollment Period: ___________ to ___________
Start (MM/DD/YY)  End (MM/DD/YY)

I hereby certify that the above named student is registered at our institution for the course listed above and is not receiving financial aid through our institution.

__________________________
Financial Aid Officer’s Signature  Date  Phone Number