

Concurrent Enrollment Form

HOST/VISITING INSTITUTION
(Please Do Not Abbreviate)

Is the form for a Study Abroad Program? Yes No

Is this a REVISION to a previous form? Yes No

The Concurrent Enrollment Form and the Consortium Agreement between Murray State University and the 'HOST/VISITING INSTITUTION' will be used to determine the student's eligibility for Title IV Federal Student Aid at Murray State.

All students **MUST** enroll in at least one course at Murray State for our office to continue processing the Concurrent Enrollment form. An exception will be made regarding enrollment during the summer session(s). The course **must** transfer into and count towards your Murray State degree.

All students MUST submit official transcripts from all institutions to Murray State University after each semester of attendance.

If the course you plan to take is considered 'Repeat Coursework', then the course may not be counted for federal financial aid purposes if you are taking the course to improve your grade.

To ensure processing of your request for financial aid, all requirements should be received in our office at least two weeks prior to the first Billing Statement due date. It is the student's responsibility to review the Requirements tab within the myGate Financial Aid tab, in addition to email notification, for any outstanding documentation that is being requested.

STUDENT SECTION ~ (Please Do Not Abbreviate the Data you are Entering)

Last Name: _____ First Name: _____ Middle Initial: _____

Murray State Student ID# (M#): _____ Social Security Number: _____

 Term of Enrollment (please check appropriate box) Fall Spring Summer Year _____

You must complete a separate form for each term of enrollment.

NAME OF COURSE	COURSE NUMBER	CREDIT HOURS	BEGIN DATE	END DATE	IF REVISION, DATE ADDED	IF REVISION, DATE DROPPED
1.						
2.						
3.						

CERTIFICATION OF HOST/VISITING INSTITUTION SECTION ~ (Please Do Not Abbreviate the Data you are Entering)

I certify the student named above has scheduled for the listed course(s) at the Host/Visiting Institution. If this student's enrollment status changes, I agree to contact Murray State of the change at the time it occurs.

The cost per credit hour is \$ _____. The tuition and fees for the above course(s) is \$ _____.

If Murray State has questions about the student's enrollment on this form, please complete the individual's contact information.

Printed Name

Email Address

Telephone Number

This document must be signed certifying the accuracy of the information provided. Any individual signing this form certifies that all information is complete and accurate. Warning: If any individual purposely gives false or misleading information on this form, he/she may be fined, sentenced to jail, or both.

Murray State University Office of Financial Aid does not allow an electronic signature.

All documentation must be completed with an original signature prior to submission to our office, including via email, mail, or fax.

Signature of the Financial Aid Administrator- Host/Visiting Institution

Date

Please return the completed Concurrent Enrollment Form to the address above.

MURRAY STATE UNIVERSITY SECTION USE ONLY

Murray State Hours:		
Visiting Institution Hours:		
TOTAL HOURS:		<i>Signature of Office of Financial Aid</i>
Murray State Tuition Calculation:		<i>Date</i>

For Registrar Office Use Only	Transfer Course				Count Towards Degree (Yes or No, Even if Repeat)				Comments
	1.	2.	3.	4.	1.	2.	3.	4.	

The Office of the Registrar has reviewed each course(s) listed above for potential transfer to Murray State University. The signature below certifies that credit for the course(s) marked as approved will apply toward the student's current Murray State degree.

Signature - Registrar Office

Date