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UW-PARKSIDE / GATEWAY 1+3 CONSORTIUM AGREEMENT FORM

Student Request for Transfer of Information between UW-Parkside and Gateway *(to be completed by student)*

I, _____ hereby request that information regarding my admission, enrollment, cost of attendance, financial aid information and transcripts to be shared between UW-Parkside and Gateway while I am an active student in the certificate.

I understand that this agreement does not pay my tuition at Gateway and that I am responsible for any payment due to Gateway. Students with debts are unable to access future services including transcripts or future enrollment.

Student Name (print): _____

Last

First

Middle

Student Address: _____

Phone: _____

Last 4 digits of SSN #: _____

DOB: _____

Student Signature: _____

Date: _____

Home Institution: UW-P Title IV School Code: 005015

Visiting Institution: Gateway

Gateway agrees not to award aid to the student name above and will notify UW-P of any changes in the student's enrollment status.

Printed Name and Title

Phone

Signature of Gateway Financial Aid Associate

Date

Signature of Gateway Financial Aid Associate

Date

Signature of Gateway Financial Aid Associate

Date

UW-P HOME INSTITUTION APPROVAL

The above named student is considered a matriculating student at UW-P although he/she will be attending classes at another institution in:

Term: _____

UW-P Credits: _____

Gateway Credits: _____

Total Credits: _____

Signature of UW-P Financial Aid Counselor

Date

Term: _____

UW-P Credits: _____

Gateway Credits: _____

Total Credits: _____

Signature of UW-P Financial Aid Counselor

Date

Term: _____

UW-P Credits: _____

Gateway Credits: _____

Total Credits: _____

Signature of UW-P Financial Aid Counselor

Date