



**UW-Parkside/Gateway Technical College
Dual Admission General Studies Certificate
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 Technical College 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-Parkside Financial Aid School Code: 005015

Visiting Institution: Gateway Technical College

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Gateway agrees not to award aid to the student name above and will notify UW-Parkside 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-Parkside HOME INSTITUTION APPROVAL

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

Term: _____

UW-Parkside Credits: _____ Gateway Credits: _____ Total Credits: _____

Signature of UW-Parkside Financial Aid Counselor Date

Term: _____

UW-Parkside Credits: _____ Gateway Credits: _____ Total Credits: _____

Signature of UW-Parkside Financial Aid Counselor Date

Term: _____

UW-Parkside Credits: _____ Gateway Credits: _____ Total Credits: _____

Signature of UW-Parkside Financial Aid Counselor Date