

2022-2023 Concurrent Enrollment Form Home Institution - MSU

Office of Financial Aid
Enrollment Services Center, Room 205
121 East Second Street Morehead, KY 40351
Phone 1-800-585-6781
Email: finaid@moreheadstate.edu



STUDENT SECTION 1: STUDENT INFORMATION

Last Name _____ First Name _____

MSU ID: M _____ Social Security Number (last four digits): _____ DOB: _____

Phone # _____ Email: _____

STUDENT SECTION 2: EDUCATION & REPORTING COURSES AS VISITING STUDENT AT OTHER INSTITUTION

Major: _____ Academic Advisor's Name: _____

Degree Pursuing: Associate's Degree Bachelor's Degree Graduate Other

Name of Institution you will be taking classes as a visiting student: _____

Example: If the class is being offered at ACTC or BSCTC please write in either ACTC or BSCTC. Please do not use KCTCS!

Department Course #	Name of Course	Number of Credit Hours for course
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

What term are you enrolled in the above-mentioned classes? Fall Winter/Spring Summer 1 Summer 2

STUDENT SECTION 3: STUDENT CONCURRENT ENROLLMENT FORM TERMS AND CONDITIONS

Please read, check the boxes and sign below to acknowledge. Your signature indicates your understanding of the terms and conditions of your request and that all information reported on this form and any attachments are true, complete, and accurate.

- I understand that the concurrent enrollment form is an agreement between MSU and another institution in order to provide financial aid to a student based on the total number of hours for which the student is enrolled at all institutions.
- I understand that the institution, at which I expect to receive my degree, is considered my "home" institution and the other institution(s) are considered the "visiting" institution(s).
- I understand it is my responsibility to inform MSU of my intent to attend more than one institution, and obtain this form.
- I understand I must complete this form for each period of enrollment (ex: fall, spring/winter, summer terms).
- I understand that I must complete all student sections of this form.
- I understand I must have my MSU advisor complete the advisor section of the agreement, and then take the agreement to the visiting institution for verification of enrollment.
- I understand that to be considered for Title IV aid purposes, this form must be completed with all signatures and turned in to the MSU Financial Aid Office prior to the last day to add a full term/semester class according to the official MSU academic calendar.
- I understand that forms received by the MSU Financial Aid Office after the last day to add a full term/semester class cannot be processed and I will not be eligible to receive Title IV financial aid.
- I understand that incomplete forms will not be processed.
- I understand I must meet all other eligibility requirements as MSU students.
- I understand I must be admitted to MSU in a degree-seeking program.
- I understand I must have a complete FAFSA (for the current academic year) on file with MSU.

- I understand verification must be completed, if applicable, prior to the disbursement of funds.
- I understand that it is my responsibility to obtain all required signatures and submit this form to the MSU Office of Financial Aid.
- I understand must be enrolled six credit hours or more through MSU.
- I understand I must contact the MSU Financial Aid Office if I intend to take less than six credit hours per semester through MSU.
Example: 3 hours MSU, 3 hours concurrent totaling six credit hours.
- I understand that the home institution is responsible for determining eligibility and disbursing financial aid to me and that financial aid awarded based on the cost of both institutions.
- I understand that I am responsible for paying fees at the "visiting" institution in accordance with any agreement for payment of fees. Students may receive funds directly from the "home" institution intended for payment of fees at the "visiting" institution.
- I understand that I cannot receive financial aid from more than one institution during the same enrollment period.
- I understand it is my responsibility to set up a payment plan or protect my class schedule at the "visiting" institution until financial aid releases at MSU.
- I understand that MSU will not pay "visiting" institution directly and that it is my responsibility to pay all charges.

Student's Name (Please Print): _____ MSU ID: _____

Student Signature _____ Date _____

ADVISOR SECTION: Student's MSU advisor or Extended-Campus Center Director must complete this section.
Thank you for completing this section of the concurrent enrollment application for above mentioned student. Please complete and return to student as soon as possible. Student must turn in this application with all signatures before the last day to add a class for the semester according to the MSU calendar.

- I certify that the course(s) listed above are fully creditable toward the student's MSU degree.

Advisor's Name (Please print): _____

Advisor's email: _____

Advisor's Signature _____ Date _____

VISITING INSTITUTION SECTION: Registrar of institution student is visiting must complete this section.
Thank you for completing this section of the concurrent enrollment application for above mentioned student. Please complete and return to student as soon as possible. Student must turn in this application with all signatures before the last day to add a class for the semester according to the MSU calendar.

- I certify that the above named student has registered for the course(s) list above.
- I understand that if the student's enrollment status changes, I agree to contact Morehead State University of the change as it occurs. Please send an email to finaid@moreheadstate.edu with any changes that need to be reported.

What is your tuition rate per credit hour? _____

Registrar's Name (Please Print): _____

Registrar's email: _____

Registrar's Signature _____ Date _____

Message to student

Dear student, Please return this completed form to the Morehead State University Office of Financial Aid with all signature. You may return in person or send in email to finaid@moreheadstate.edu.