



Missouri Western State University  
 4525 Downs Drive, St. Joseph, MO 64507  
[www.missouriwestern.edu](http://www.missouriwestern.edu)

Study Away Office  
 (816) 271-4194  
 Fax: (816) 271-5922  
[studyaway@missouriwestern.edu](mailto:studyaway@missouriwestern.edu)

## Study Away Outside Programs Cost Estimate

Academic Semester \_\_\_\_\_

### DIRECTIONS

Students must complete **SECTION A: Student Information** and **SECTION B: Credits to be completed**. The school you will be attending (the host institution) must complete **SECTION C: Estimated expenses**. Supporting documentation of the program fees must be attached and may include, but is not limited to, a photocopy of study away costs listed in the host institution's course catalog or a letter on official institutional letterhead that lists the study away costs. Both the student and the host institution's representative must add their signatures to **SECTION D: Certification**. Please submit the completed form, along with the Study Away Outside Programs Financial Aid Contractual Agreement, to the Study Away Office.

### SECTION A: Student Information

Name (last, first, middle initial)		
Birth date	University ID number	University e-mail address
Permanent address (address, city, state, ZIP)		
Phone number (including area code)	Estimated departure date	Estimated return date

### SECTION B: Program Description

Program name		
Accrediting institution (school issuing transcript for program coursework)		
Program sponsor		
Study Away registration to be completed	<input type="radio"/> Fall Year 20 ____ Credit total: ____	<input type="radio"/> Spring Year 20 ____ Credit total: ____
		<input type="radio"/> Summer Year 20 ____ Credit total: ____

### SECTION C: Estimated Expenses

Tuition	\$
Program administrative and insurance fees	\$
Study Away Office administrative and insurance fees (MWSU)	\$
Room and/or board	\$
Transportation to and from program site	\$
Passport/Visa/required documents (plus cost of photos and immunizations)	\$
Books and materials	\$
Essential daily living expenses (including local transportation)	\$
Miscellaneous expenses (World Education Services, etc.)	\$
<b>TOTAL ESTIMATED EXPENSES</b>	<b>\$</b>

## SECTION D: Certification

I certify all of the information on this form is true and accurate and that I have read and agree with the information below. The student must check all of the boxes below to acknowledge his/her certification of this information.

- I have been admitted to a degree or certification program at Missouri Western State University.
- I have an official Major Declaration Form on file with Missouri Western State University.
- I understand that I am responsible for reading and understanding the MWSU Satisfactory Academic Progress Policy for financial aid recipients available online at [www.missouriwestern.edu/finaid](http://www.missouriwestern.edu/finaid).
- I understand that I am responsible for taking care of any holds on my record prior to departure. Holds will prevent me or the Study Away Office from processing the registration required to complete my studies. My failure to be registered before the end of the add/drop period for each term I am studying away will lead to delay, reduction or cancellation of my financial aid.
- To the best of my knowledge, the information provided on this form represents a realistic estimate of the costs and credits.
- I understand that my financial aid will be disbursed into my MWSU student account and automatically applied to the balance due for any MWSU required administrative fees or insurance costs.
- I understand that I will receive a billing notification sent to my University e-mail account that directs me to my online billing statement for any MWSU required administrative fees or insurance costs not covered by my financial aid and that payments will be due according to the published schedule.
- I understand that I must use any financial aid credit balance to make payment directly to my program sponsor or host university for all non-MWSU program fees. I will not use my financial aid to cover other expenses until all of my charges from MWSU and my host institution are paid in full.
- I understand that if I drop/withdraw from courses or earn fewer than the credits for which I was enrolled, I may be billed for financial aid that I have received for which I am no longer qualified. I will notify the Office of Financial Aid and my host institution immediately if I reduce my credit load below the registration indicated above or withdraw from my program.
- I will report the receipt of any scholarship funds to the MWSU Office of Financial Aid.

### Student's signature

Signature of student (required)

Date

### Host's signature

Name of host representative (please print legibly)

Title

Signature of host representative (required)

Date



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## Study Away Outside Programs Financial Aid Contractual Agreement

Academic Semester \_\_\_\_\_

### DIRECTIONS

The student named in **SECTION A** below has applied for federal and/or state financial aid from Missouri Western State University while studying abroad through your institution. This is possible under the following circumstances:

- The Study Away Office at Missouri Western State University, St. Joseph, MO, must approve the student's proposed program of study and certify that the program course work will generate at least the minimum number of credits required to maintain financial aid eligibility. Furthermore, the student must have an official Major Declaration Form on file with Missouri Western State University.
- Your institution completes **SECTION B** of this form, **along with SECTION C of the Study Away Outside Programs Cost Estimate** form (enclosed). Please also submit **supporting documentation for the fees you list on the cost estimate**. Documentation may include, but is not limited to, a photocopy of study abroad costs listed in your catalog or a letter written on institutional letterhead that lists the study abroad costs. Please return the completed forms and the additional documentation by fax or mail the Study Away Office at Missouri Western State University.

**Please note:** This agreement does not make Missouri Western State University party to arrangements concerning program payment between your institution and the student.

### SECTION A: Student Information

Name (last, first, middle initial)		
Social Security number	University ID number	University e-mail address
Program start date (month, day, year)	Program end date (month, day, year)	Minimum credits contracted

### SECTION B: Contractual Agreement

Through this agreement, Missouri Western State University, St. Joseph, Missouri, hereafter referred to as the University, contracts with the institution named in this section, hereafter referred to as the Host, to provide a portion of the education for the degree program of the student named above, hereafter referred to as the Student.

1. For U.S. federal financial aid purposes, the Student studying at the Host will be considered enrolled at the University, which will process federal financial aid, and will be considered a visiting student at the Host. The Host will award no federal financial aid. The Host agrees to inform the University promptly of any Host scholarships that the Host or cooperating institutions may award the Student to ensure that the University does not award funds in excess of the Student's financial need.
2. The University agrees that credit hours earned by the Student while studying at the Host will be considered for transfer to the Student's University degree, providing the Student earns passing grades and the courses are applicable to the Student's degree program.
3. The University disburses financial aid directly to the Student. The Student is responsible for payment of fees to the Host. The University is not responsible for any payments owed by the Student to the Host.
4. The Host will promptly inform the University if the Student withdraws or never attends the program. Such notice will include the last date of attendance.

**SECTION B: Contractual Agreement *continued***

5. The Host will provide an official transcript or equivalent documentation to the University as soon as possible, noting successful completion of the program. Such documentation will include course titles, number of credit hours or equivalent measure, and grades or comparable indication of performance. At the Student's request, the Host will send this documentation to the Study Away Office at the University.
6. The Student is responsible for any costs incurred by the Host for providing the official transcript or equivalent documentation. If applicable, the Student is also responsible for the cost of evaluation services provided by World Education Services (WES).
7. The Host will mail, fax, or e-mail any correspondence pursuant to this agreement to the Study Away Office at the University. The University will direct any such correspondence to the Host contact person at the address given below.

**To be completed by the Host**

Name of Host institution

Study away program location (institution, city, country)

Name of Host contact person

Title

Phone (include area code/country code)

Fax (include area code/country code)

E-mail address

University department

Mailing address

Mailing address

State/country/zip code/postal code

Signature of Host representative

Date

**SECTION C: To be completed by the University**

Name of University representative (please print legibly)

Title

University department

Signature of University representative

Date

Name of University financial aid representative (please print legibly)

Title

Signature of University financial aid representative

Date

**SECTION D: To be completed by the Student**

I, the Student, certify that I have read and understand the terms of the Financial Aid Contractual Agreement and agree to abide by its terms.

Signature of Student

Date