

## Away Form for UMS/Maine Community College System

UNIVERSITY of MAINE at AUGUSTA Student Financial Services 46 University Drive, Augusta, ME 04330-9488

207.621.3455 or 1.877.862.1234 Fax: 207.621.3384 or TTY: 1.800.316.3600 umafa@maine.edu

This form is to be used by students planning to take courses at one of the institutions within the University of Maine System or Community College System, to determine if the courses can be covered by UMA financial aid funds. **NOTE:** Students cannot receive financial aid from more than one institution during an enrollment period.

## Conditions of Eligibility

Courses taken at another UMS institution or within the Community College System will be considered for UMA financial aid if the following conditions are met:

- Must be required in your **PRIMARY** degree program
- May **NOT** be used to fulfill one of your general elective requirements
- The course is not available at UMA during the enrollment period you wish to enroll
- You are meeting the requirements for Satisfactory Academic Progress (SAP)
- Complete Steps 1-3 on the back of this page
- Send completed form to the Student Financial Services via <u>umafa@maine.edu</u>
- Must be received <u>prior</u> to the start of the semester or term to be considered
- You will receive an acknowledgement in writing within two weeks of receipt of this request

## Statement of Responsibilities

- I must follow payment requirements at the host institution regardless of my receipt of financial aid at UMA. I understand that UMA may not send payment until the end of UMA's add/drop period. Actual cost of tuition and fees at the community college will be used to calculate your budget.
- I must inform Student Financial Services at UMA if I withdraw from my course(s) at the host institution. I also understand that I may be required to repay some of my financial aid award should I withdraw.
- It is my responsibility to request an official academic transcript be sent to UMA upon completion of my community college course(s). The community college may charge a fee for the transcript. UMS electronic transcripts are automatically requested by UMA's Registrar's Office. I understand that a grade of C- or higher is required for transfer to UMA and the GPA earned at a host institution does not transfer or impact the UMA earned GPA.
- I understand these courses will be considered as attempted courses when my eligibility for financial aid is reviewed in regards to Satisfactory Academic Progress (SAP). My failure to have a community college official transcript sent to UMA or failure to complete the host institution courses may result in ineligibility for future financial aid.
- I understand that once I take a course at a school other than UMA, review of my continued eligibility for financial aid under the SAP policy must be conducted manually. As a result, future financial aid disbursements may be delayed.
- I understand that if I take a course at a school other than UMA, I may not be eligible for UMA specific aid such as scholarships and/or the Pine Tree State Pledge.

I have read, understand, and completed all required information on both sides of this form. I understand I must receive approval in writing from Student Financial Services before this process is finalized. I understand no funds will be released until UMA confirms my enrollment with the host institution.

Student Signature	Date

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/Iail	ing Address					
Street/PO Box City		ity	State		ZIP	
Day	ime Phone	ID No	ımber			
hone	Number	Student	ID Number			
Curr	ent Degree Program	Enrol	lment Period for this	s Request		
Current Degree Program			Fall Sprin	Spring Summer Year		
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A B	Student: Complete A & B  Course to be taken at host institution: Course Number, Name & Number of credits  Name of host institution  3 - Advisor Approval	Course #1	Cours	e #2	Course #3	
A B	Student: Complete A & B  Course to be taken at host institution: Course Number, Name & Number of credits  Name of host institution  3 - Advisor Approval complete this section with an advisor. The personal complete this section with an advisor.	Course #1	Cours	e #2	Course #3	
A B	Student: Complete A & B  Course to be taken at host institution: Course Number, Name & Number of credits  Name of host institution  3 - Advisor Approval complete this section with an advisor. The person Transfer Office: Complete A & B  List the UMA transfer equivalent for the	Course #1	Cours	e #2	Course #3	
A B A A A	Student: Complete A & B  Course to be taken at host institution: Course Number, Name & Number of credits  Name of host institution  3 - Advisor Approval complete this section with an advisor. The person Transfer Office: Complete A & B  List the UMA transfer equivalent for the course listed above  Is this course required for this student to complete their	Course #1	Cours	e #2	Course #3	

I start of the semester or session.

RETURN TO: Student Financial Services, University of Maine at Augusta, 46 University Drive Augusta, ME 04330 / <a href="maine.edu"><u>umafa@maine.edu</u></a> QUESTIONS: Locally: 207.621.3455; Toll Free: 1877.862.1234, ext. 3455; E-mail at: umafa@maine.edu

Office Use Only									
Complete:	Y / N	Date Returned to Student	Other:		ision: roved	C1	C2	C3	PS Coded
1st Date Rec'd by FAO		2nd Date Rec'd by FAO		Deni		_	_	_	. 0 00000
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