



UMA Office of Financial Aid  
41 University Drive  
Augusta, ME 04330  
207-621-3412 or 877-862-1234 (T)  
207-621-3384(F) or 800-316-3600 (TTY)  
umafa@maine.edu

## 2024-2025 Nursing Away Form UMA/UMF

This form is to be used by student planning to take courses at UMF and is covered by the MOU between the two universities. We will use this form 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 intuition 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 of this form
- Send completed form to Financial Aid via [umafa@maine.edu](mailto:umafa@maine.edu)
- Must be received prior to the start of the semester or term to be considered
- You will receive an acknowledgement in writing within two week 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 add/drop period. Actual cost of tuition and fees at the community college will be used to calculate your budget.**
- **I must inform the Office of Financial Aid at UMA if I withdraw from the 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 transcript to be sent to UMA upon completion of my course(s). The any charges that result of that request, I am responsible for. UMS electronic transcripts are automatically requested by UMA's Registrar's Office. I understand that a grade of C or better is required for transfer to UMA and the GPA earned at the host institution does not transfer to 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 SAP. My failure to have any other institution official transcripts sent to UMA or failure to complete the host institution courses may result 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, understood, and completed all required information on both sides of this form. I understand I must receive approval in writing from Office of Financial Aid before this process is finalized. I understand no funds will be released until UMA confirms my enrollment with the host intuition.**

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Student Signature

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Date

## Complete Other Side

**Incomplete forms will be returned to you – Make sure you have read and signed the other side of this form before proceeding to step 1.**

### Step 1: Student Information

Last Name	First Name	Middle
Mailing Address	City	State      Zip
Phone Number	Stu ID Number	
Current Degree Program	Sum ____ Fall ____ Spr ____	Year
	Enrollment Period for Request	

### Step 2: Course Information

List the course(s) you would like to take and answer the following questions to determine if the course(s) are eligible for UMA Financial Aid.

Student Complete: A	A (Course ID + # credits)	B (Institution)
Course #1		UMaine Farmington
Course #2		UMaine Farmington
Course #3		UMaine Farmington
Course #4		UMaine Farmington
Course #5		UMaine Farmington
Course #6		UMaine Farmington

### Step 3: Advisor Approval

Please complete this section with an advisor. The person signing this form must act in an advising capacity at UMA

Advisor Complete: A& B	A (UMA Course for Transfer)	B (Required Y/N)
Course #1		
Course #2		
Course #3		
Course #4		
Course #5		
Course #6		

\_\_\_\_\_  
UMA Advisor's Signature

\_\_\_\_\_  
Date

**It is the ultimately the student's responsibility to make sure this form is complete and submitted to the Office of Financial Aid prior to the start of the semester or term.**

**RETURN TO:** Office of Financial Aid, University of Maine Augusta, 46 University Drive, Augusta, ME 04330

**QUESTIONS:** Locally 207-621-3412 – Toll Free 877-862-1234 x 3455, E-mail: UMAFA@maine.edu

*Office Use ONLY*

Complete: Yes / No

\_\_\_\_\_  
Date Returned to Stu

Other:

Decision    C1   C2   C3   C4   C5   C6

Approved    \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

Denied       \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

Does not meet qualified conditions \_\_\_ SAP

\_\_\_\_\_  
1<sup>st</sup> Date Rec'd by OFA

\_\_\_\_\_  
2<sup>nd</sup> Date Rec'd by OFA

PS Coded \_\_\_    EML to Stu \_\_\_

\_\_\_\_\_  
Reviewed by    Date