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SAN DIEGO STATE
 UNIVERSITY

Office of Financial Aid and Scholarships
 sdsu.edu/financialaid

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 on the home page.

Load Documents
 Please upload your Financial Aid and
 Scholarship documents

FILL IN STUDENT INFORMATION	
Last Name	_____
First Name	_____
Telephone Number	_____
SDSU Red I.D. Number	_____

2021-22 Concurrent Enrollment Agreement

To apply for concurrent enrollment, you must meet the following criteria:

1. **Attach enrollment confirmation** from the concurrent institution for the specific course(s) indicated in Section 1 below. After course(s) is completed, you must submit an unofficial transcript with the grade(s) received.
2. Be enrolled in a minimum of 6 SDSU main campus units for the term this Concurrent Enrollment Agreement is being submitted.
3. Have not already transferred the maximum 70 units if concurrent enrollment is at a community college.
4. Have not already transferred the maximum 24 units if concurrent enrollment is through SDSU Global Campus.
5. Be enrolled for courses that will be accepted toward your SDSU degree.
6. Be making satisfactory academic progress to remain eligible for financial aid.

Section 1 - To Be Completed by Student			
Indicate the Enrollment Period ▶ <input type="checkbox"/> Summer Session 2021 <input type="checkbox"/> Fall Semester 2021 <input type="checkbox"/> Spring Semester 2022			
Name of Concurrent Institution	Concurrent Units for this Enrollment Period	SDSU Units for this Enrollment Period	TOTAL Units (Concurrent + SDSU)
List Course(s) at the Above Institution for the Enrollment Period	Course Start Date	Course End Date	

My signature certifies that ALL of the following are true:

1. I will have my concurrent institution transfer my units to SDSU once I have completed my course(s).
2. I understand that future Concurrent Enrollment Agreements will not be processed until units from any prior Concurrent Enrollment Agreements have been posted to my SDSU academic record.
3. I understand that for any course I've repeated, I cannot request another Concurrent Enrollment Agreement.
4. I will keep the SDSU Office of Financial Aid and Scholarships informed of any changes in my enrollment.
5. I understand that even by combining my SDSU units with my units at another institution, my aid eligibility may differ from the original award because of specific requirements for certain aid programs (e.g., State University Grant amount is based on fees paid for SDSU main campus units).
6. I understand that my summer 2021, fall 2021, and/or spring 2022 Concurrent Enrollment Agreement will **not be processed** and my **aid will not be adjusted** until the corresponding census date for that semester.
7. I understand that **this document must be submitted** by the **deadline dates** indicated.

Census Dates	
Summer 2021 Census▶ July 19, 2021
Fall 2021 Census▶ September 20, 2021
Spring 2022 Census▶ February 15, 2022
Document Submission Deadlines	
Attending Summer 2021▶ July 23, 2021
Attending Fall 2021▶ December 1, 2021
Attending Spring 2022▶ April 22, 2022

Student Signature _____	Date _____
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Student Loan Borrowers: For student loans to remain in a "deferment" status, **you must be enrolled at least half time.** The SDSU Office of the Registrar reports your enrollment information to various loan servicers throughout the year. The Office of the Registrar reports your enrollment **ONLY** for your units at SDSU.

Section 2 - To Be Completed by the Concurrent Institution Financial Aid Office Staff

Is the student receiving financial aid at your institution? Yes No
 (Do not count the California College Promise Grant.)

If yes, list the semester and type of aid the student is receiving.

Semester _____ Type of aid _____

Indicate the registration fee paid by the student for the course(s) at your institution: \$ _____

Indicate the food and housing cost calculated for the student: \$ _____

My signature confirms that the host institution will notify the SDSU Office of Financial Aid and Scholarships if the student named in Section 1 withdraws or receives financial assistance for the designated enrollment period.

Print Host Institution Official's Name		Host Institution Official's Telephone Number
Host Institution Official's Signature / Stamp		Date
		Name of Host Institution

Section 3 - To Be Completed by the SDSU Office of Financial Aid and Scholarships Staff

This student's SDSU financial aid record has been updated based on the information in Sections 1 and 2.

SDSU Office of Financial Aid and Scholarships Staff Signature	Date
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For SDSU Office of Financial Aid and Scholarships Use ONLY	
1. Satisfactory Academic Progress <input type="checkbox"/>	Comments: _____
2. Enrollment Confirmation Attached <input type="checkbox"/>	Comments: _____
3. Transfer Units (70 Community College Max) <input type="checkbox"/>	Comments: _____
4. Transferability of Units <input type="checkbox"/>	Comments: _____