CARSON-NEWMAN UNIVERSITY

CONTRACTUAL AGREEMENT TO STUDY ABROAD FOR NON-C-N PROGRAM (CASA)

[CITE: 34CFR668.39]

In order to receive Title IV Financial Assistance funding through Carson-Newman College under this Contractual Agreement, the student is required to remain enrolled as a regular student in an eligible program at Carson-Newman and program be approved for academic credit. The student is required to complete Section I of this form, route it to academic dean/advisor to complete Section II, then forward to the proper parties at the school/program the student will be visiting for completion of Section II and have it returned to Office of Financial Assistance at Carson-Newman College. Once all sections of this Agreement are completed, the student and host institution will receive copies of this form. The student is responsible for following up with all parties to insure that the Contractual Agreement is completed in a timely manner. Carson-Newman scholarships/grants are not available for this type of study abroad.

Section I: To be completed by student

Name: _______________________________ CN ID Number: _______________________________

Contact Phone: _______________________________ Home Phone: _______________________________

Host Institution/Program: _______________________________ Dates at Host Institution: ___________ to ___________

Host Location: __________________________________________ Host Website Address: _______________________________

Statement of Authorization:

I agree to:

- Submit this form to Carson-Newman College and to my Host Institution for completion.
- Inform Carson-Newman College immediately if I choose not to enroll or otherwise cancel my participation in this program.
- Allow Carson-Newman College and my Host Institution to share information relating to my enrollment and financial aid eligibility.
- Enroll in at least 1/2time course of study.
- My financial aid being disbursed directly to my student account.
- Electronic processing of assistance and electronic communication with regards to my financial aid.
- Make arrangements for payment of program if payment is required in advance of aid disbursements.

I understand that:

- My academic dean/advisor must approve the courses to be taken at this program for credit towards my degree at Carson-Newman College through the Authorization To Take Courses At Another College form and The Office of Financial Assistance cannot process assistance until the form is submitted to Registrar’s Office.
- Any balance currently owed Carson-Newman College must be satisfied prior to any financial aid funds being released.
- I am responsible for all payments due to my Host Institution, and making arrangements for my disbursement check to be handled by someone with my financial power of attorney.
- The earliest my financial aid may disburse is 10 days before the start of the program and that one term programs will require at least two disbursements (beginning & middle) of program.

Student Signature: ___________________________ Date: ___________________________

Section II: To be completed by Carson-Newman College Academic Dean/Advisor

I state that the student has been approved to take courses through the Authorization To Take Courses At Another College form:

Academic Dean/Advisor Signature: ___________________________ Date: ___________________________

Section III: To be completed by Host Institution/Program in US Dollars

Cost of Attendance:

Tuition & Fees: $____________________
Room and Board: $____________________
Books & Supplies: $____________________
Travel Allowance: $____________________
Personal Living Allowance: $____________________
Special Expenses: $____________________ (provide explanation)

Total: $____________________

The Host Institution/Program:

- Certifies student is accepted for enrollment.
- Agrees not to process or award any Federal Title IV aid for this student.
- Agrees to notify the Carson-Newman College within 14 calendar days if the student withdraws from the program or decreases enrollment below half-time before its conclusion.
- Agrees to notify Carson-Newman College of student aid that the student receives from non-Carson-Newman sources.
- Agrees to provide a transcript of the student's academic record to Carson-Newman College.

Printed Name: ___________________________ Title: ___________________________
Address: ___________________________ City: ___________________________ State: ___________ Zip: ___________
Phone: (______) Fax: (______) E-mail Address: ___________________________
### Section III: To be completed by Carson-Newman College Office of Financial Assistance

<table>
<thead>
<tr>
<th>Award Name</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Aid Eligibility: ________________________________

Carson-Newman College agrees to:
- Consider this student enrolled in an eligible program of study at the host institution.
- Determine eligibility for financial aid based on the cost of attendance at the host institution.
- Maintain all records in accordance with federal regulations.
- Disburse all funds to the student.

<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(    )</td>
<td>(    )</td>
<td></td>
<td>()</td>
</tr>
</tbody>
</table>

Phone:        Fax:        

Authorized Signature: Date: 

April 20, 2011  DSS