

SECTION III – To be completed by the HOST institution.

Enrollment Period (*mm/dd/yy to mm/dd /yy*): _____ Total Credits: _____

Standard Allowance Amounts (for the term indicated in Section II)

Tuition	\$ _____
Fees	\$ _____
Room/Board	\$ _____
Living Allowance	\$ _____
Personal	\$ _____
Books/Supplies	\$ _____
Transportation	\$ _____
Other	\$ _____
Total Charges:	\$ _____

Host Institution Certification:

- The HOST school certifies the student named on this form is enrolled for the period of attendance indicated.
- The HOST school agrees to notify UMass Boston if the student withdraws from the program prior to the conclusion of the enrollment period.
- The HOST school agrees not to pay the student any state, federal, or institutional financial aid resources for attendance during the enrollment period listed.
- The HOME school agrees to provide payment to the student, if eligible, for the term specified. *The student is responsible for ensuring payment to the HOST school.*

HOST Institution Signature	_____
Printed Name	_____
Title	_____
Date	_____
Phone	_____
Fax	_____

~~~~~  
**SECTION IV – To be completed by UMass Boston**

|                        |              |
|------------------------|--------------|
| UMass Boston Signature | _____        |
| Printed Name           | _____        |
| Title                  | _____        |
| Date                   | _____        |
| Phone                  | 617-287-6300 |
| Fax                    | 617-287-6323 |

**Date submitted:** \_\_\_\_\_

**Date processed:** \_\_\_\_\_