

**2022-2023 Academic Year CONSORTIUM AGREEMENT between
THE UNIVERSITY OF ARKANSAS – HOPE • TEXAKANA (Home School)
and NATIONAL PARK COLLEGE (Host School)**

SECTION 1 - STUDENT

Name:	UAHT Student ID #:
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Consortium Period: (Must be completed for each term prior to studying at Host School) Summer 2022 Fall 2022 Spring 2023

It is agreed that the above-named student is a matriculated student at **UAHT**, taking courses at **NPC** with approval of **UAHT**. Approved courses may consist of those below, which will apply toward a degree in the **Funeral Service Program at UAHT**. The student must be enrolled in a **minimum of three (3) credit hours through UAHT**.

Fall Semester	Credits	Spring Semester	Credits
ENG 1113 English Composition I	3	ENGL 1123 English Composition II	3
CIS 1023 Introduction to Computing (also accepted: CIS 1013 Information Systems)	3	ACT 1103 Principles of Accounting I (also accepted: CIS 1003 Basic Accounting)	3
BUS 1113 Introduction to Business	3	SPCH 1103 Fundamentals of Public Speaking	3
Select One: MATH 1213 Quantitative Literacy MATH 1123 College Algebra	3	FSED 1003 Funeral Service Chemistry WEB Class from UAHT	3
FSED 1013 Funeral Service Anatomy WEB Class from UAHT	3	NPC class schedule must be submitted to UAHT each semester	

It is agreed that:
NPC will verify the enrollment status of the student for **each semester** and will notify **UAHT** of any change in enrollment status.
NPC will **NOT** pay the student Federal Pell Grant and/or campus-based funds or process a Federally Guaranteed Student Loan for the terms in which the student is enrolled under this agreement.
UAHT will monitor satisfactory academic progress and other requirements to be eligible to receive Title IV funds, will determine eligibility, package and disburse Title IV funds, and administer all applicable student financial aid refund and repayment policies.
The student will be responsible to **NPC** for actual costs for the terms enrolled under this agreement.

Student's Signature _____	Date _____
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SECTION 2 – NATIONAL PARK COLLEGE FINANCIAL AID OFFICE

Student Name: _____ is registered for _____ credit hours this semester at NPC.

Name: _____	Phone: _____
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Signature _____	Date _____
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Title: _____

SECTION 3 – UNIVERSITY OF ARKANSAS - HOPE • TEXARKANA

Name: _____	Phone: _____
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Signature _____	Date _____
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Title: _____

Return this form by fax to 870-722-8145 or email to marla.bush@uaht.edu or finaid@uaht.edu. A signed copy will be returned for your records.