



Memorandum of Agreement

HOME Campus: UW – Milwaukee
VISITING Campus: UW Colleges Online

Name of Student: _____ Social Security #: _____

Term: _____ Year: _____

My signature below gives permission to my Home campus and UW Colleges Online to share information about my financial aid award at my Home campus. Additionally, I agree to pay UWC Online for my full tuition and fees owed within 10 business days of the disbursement of my financial aid from my Home institution. ***I understand that failure to make payment by this date will result in a \$100 late fee being added to my account and I will be responsible for the full amount of tuition and fees owed to UW colleges. I also understand that non-payment will result in a hold being placed on my UWC record that will prevent future registration and release of my UWC transcript.***

 Student Signature (required)

 Date (required)

UW – Milwaukee Information

(To be completed prior to being sent to UWC Online)

Amount of UWM financial aid remaining
 and available for payment of UWC tuition
 and fees after UWM tuition and fees are paid.

\$ _____

Disbursement Date for Term: _____

 Financial Aid Administrator – UW – Milwaukee

 Signature

 Date

Return completed form to:

UW Colleges Online
 780 Regent Street, Suite 130
 Madison, WI 53715-2635
 Phone: 608/263-9765
 FAX: 608/263-6711