If you currently receive federal, state, or institutional financial aid, you may be able to use some or all of your aid toward the cost of your study abroad program with SAI Programs. This includes, but is not limited to, scholarships, grants and personal loans.

PLEASE NOTE: This form should only be completed and returned by students who plan to use financial aid monies to pay for any portion of their study abroad program costs and require deferring payments to SAI. If you receive monies from a GI Bill, Veteran’s Benefits, a 529 Plan, or Tuition Benefit Programs, please contact our Business Office before you begin this process.

- **Step 1**: Contact your university’s financial aid office to determine if it is possible to use your financial aid toward your SAI program cost. It is important that you take the necessary steps to ensure a successful transfer of payment. Find out if a “Consortium Agreement” will be required between your school and SAI.

- **Step 2**: Ask your Financial Aid Advisor to complete the Financial Aid Verification Form (page 2) and return it to you directly. **You are then solely responsible emailing it back to the SAI Business Office by: 30 days before the start of your program**

- **Step 3**: Complete the Agreement to Pay & Cancellation and Withdrawal Policy (page 3) and fax or scan it back to the SAI Business Office by: **30 days before the start of your program**. Your financial aid funds will not automatically be sent to SAI and in most cases will be disbursed directly to you. If your aid is released AFTER you have already left for the program abroad, it is your responsibility to make arrangements for payment to be sent to our office. This may require the assistance of a third party (e.g. your parent/guardian/school).

**REMEMBER:** It is your responsibility to ensure these forms are completed and returned to the SAI Business office by: **30 days before the start of your program**.

Any balance that is NOT covered by your financial aid is due by **25 days before the start of your program**.

For questions, contact the SAI Business Office at: 800-655-8965 or financialaid@saiprograms.com.
1. Please list the total amount(s) of financial aid awards that the student has accepted below:

<table>
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<tr>
<th>Type</th>
<th>Amount (e.g. $5,000)</th>
<th>Anticipated Disbursement Date &amp; Amount (e.g. Jan 15 / $2,500 / March 15 / $2,500)</th>
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SUBTOTAL: $__________

2. ($__________) The dollar amount that the home university will be deducting from the SUBTOTAL (including any and all tuition fee balances and study abroad fees assessed).

3. $ The dollar amount that remains for the student to pay his/her SAI balance. NOTE: Not all students will have funds remaining.

4. Has the student completed all necessary financial aid documents and accepted financial aid listed above?: ( ) Yes ( ) No

5. To whom will funds be disbursed: ( ) SAI Programs ( ) Student ( ) Parent/Other

TO BE FILLED OUT BY THE STUDENT

I confirm that my financial aid advisor has completed this form. I also confirm that I have not entered any dollar amounts or disbursement dates on my own.

Student Name (please print): ____________________________________________________________

Student Signature: ___________________________________________________________________

Home University: _____________________________________________________________________

Phone: __________________________ Email: __________________________

Please email the completed Page 2 and 3 of the SAI Payment Deferment Paperwork to: financialaid@saiprograms.com. For questions, contact the SAI Business Office at: 800-655-8965.
SAI allows financial aid students to defer the amount that financial aid will cover while requiring that the final financial aid payment is sent within two weeks of its disbursement (but no later than October 15, 2020). Failure to make payment by this date may result in suspension from the program, restriction from attending classes, and a hold on your transcript.

If a financial aid student cancels or withdraws from his/her program, s/he remains liable for any penalties as reflected in the SAI Cancellation and Withdrawal Policy. Penalty fees will be billed to the student and due immediately. Unpaid balances may be referred to a third-party collections service. **Please refer to our website for your particular program’s Cancellation and Withdrawal Policy.**

*By signing below, I certify that I have read and agreed to the Agreement to Pay & Cancellation and Withdrawal Policy.*

Print Name of Student (Required)

Signature of Student (Required) ___________________________ Date ____________

**Responsible Third Party**

If financial aid funds will be disbursed to a third party (e.g., parent, guardian, school administrator) and that person will be responsible for payment of the SAI program fee balance, please complete the section below.

Name of Responsible Third Party (Parent/Guardian/School) ___________________________ Telephone Number ____________

Email Address of Responsible Third Party ___________________________

Signature of Responsible Third Party ___________________________ Date ____________

Please email the completed Agreement to Pay & Withdrawal and Cancellation Policy form to: financialaid@saiprograms.com. For questions, contact the SAI Business Office at: 800-655-8965.