

VISITING STUDENT AGREEMENT

	(Host Institution)	
In the matter of financial aid for:		
Name of TJSL Student	Social Security Number	
The individual authorized to sign below do hereby agree to	the following:	
	may upon review, accept the a	institution and has accepted the above named student as a approved transfer credits satisfactorily earned by said student ogram. TJSL will certify federal and private loans for TJSL
The above-named host institution agrees not to process fin Progress and notify the parent institution if student reduces		
On Behalf of Thomas Jefferson School of Law:		
Financial Aid Office	Title	Date
HOST I	NSTITUTION PLEASE CO	OMPLETE
Name of Program#of Units	Address of Host Sc	chool
Enrollment Status, Half-Time: Full-Time:		
Beginning & Ending Dates of Program:		
On Behalf of the Host Institution: (start)	(end)	
Program Budget:		
Tuition & Fees		
Books & Supplies		
Room & Board		
Airfare & Transportation		
Misc. Expenses		
TOTAL		
Financial Aid Office Signature	Name/Title	Date
Records Office Signature	Name/Title	Date

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