

Financial Aid Consortium Agreement

A. STUDENT INFORMATION

Name: _____ ACC ID #: S _____

Term (circle one): Fall Spring Summer

B. CONSORTIUM AGREEMENT

A consortium agreement allows a student to receive financial aid for courses at another institution (HOST School) while taking courses and earning a degree/certificate at ACC (HOME School). As allowed in part 668.19, Student Assistance General Provisions, and Part 690.9, Pell Grant Program, Code of Federal Regulations, this Consortium Agreement is entered into between Arapahoe Community College (HOME School) and the HOST School (named below) for the purpose of providing federal financial assistance to the student named above.

BEFORE YOU SIGN THE FORM, READ AND INITIAL THE ITEMS BELOW:

- _____ I understand that I must be enrolled in a minimum of Six (6) credit hours at ACC and up to twelve (12) credit hours for this enrollment period.
- _____ I understand I must be PELL eligible in order to apply for a consortium agreement.
- _____ I understand that I can only take courses at a HOST institution that are applicable to my degree/certificate at ACC.
- _____ I understand the course is required for my declared degree at ACC but is not offered, OR is full for this specific term, OR I'm currently enrolled in a program that requires me to take specific courses at another institution.
- _____ I understand I'm responsible for the payment of tuition, fees and all incurred debt at the HOST School. ACC will not make payment to any other institution on my behalf.
- _____ I understand I must be a degree seeking student at ACC and I must be making satisfactory academic progress including receiving financial aid at ACC up to 150% of my declared degree.
- _____ I will notify each school if I withdraw from any course(s) at either school.
- _____ I will submit a copy of final grades to ACC no later than 14 days from the end of the term. Failure to submit this will prevent us from disbursing any future aid.
- _____ I understand that failure to adhere to these requirements will cause a recalculation of my award which may result in a balance due.

REQUIRED DOCUMENTATION (Incomplete requests will not be approved):

- _____ Consortium agreement form- completed by student and HOST School Financial Aid office
- _____ Copy of the schedule from the HOST school for the term of this agreement
- _____ Document showing the total cost of tuition and fees for the courses taken at the HOST school for the term of this agreement
- _____ Copy of ACC Degree Check (you can print this from MyACC)

TO BE COMPLETED BY HOST SCHOOL FINANCIAL AID OFFICE:

HOST School: _____ HOST School ID#: _____

Student's tuition and fees for the term at the HOST school: \$ _____

1. ACC is the HOME institution for all financial matters.
2. ACC agrees to disburse all financial aid in accordance with federal and state regulations, as appropriate, for the term(s) specified by the HOST school. For details visit <https://www.arapahoe.edu/paying-college/financial-aid>
3. The HOST school agrees not to process any federal, state and/or campus-based program financial assistance during the term specified.

Financial Aid Official's Name: _____ Title: _____

Signature: _____ Phone: _____

Email: _____ Date: _____

TO BE COMPLETED BY STUDENT:

HOST School Course Info: Student must include a copy of the HOST school course schedule and the ACC Degree Check with this form.

Course Name	Course Number	Credit Hours	Course begin and End Dates

Student's ACC Degree Program: _____

I agree that this consortium agreement will be in effect only for the term and courses indicated above. If I take courses in the future at another institution, I will have to complete another consortium agreement. I authorize ACC to collect any related records from the host as well as provide the host with any student information required. Additionally, I certify that I will remain enrolled in at least six (6) credit hours at ACC for the consortium period. I have verified that the course(s) I am enrolled in at the HOST school are applicable to the degree or certificate program shown above, and that I have not previously earned credit for these courses, nor have I previously transferred these courses to ACC.

Student Signature **Date**

ACC INSTITUTIONAL USE ONLY:

Consortium is: Approved Denied Other _____

ACC credit hours _____ + HOST credit hours _____ = Total credit hours: _____

ACC FA Approval Signature _____ **Date** _____