

T 910.272.3352 Email: finaid@robeson.edu
F 910.272.3314 Website: https://www.robeson.edu/fa/

## 2020-2021 Financial Aid Consortium Agreement

Student's N	ame:Student ID:
Address:	City/State/Zip
Phone #:	Email:
Consortium another (hos degree, diplo nost school	Agreements allow students to be considered enrolled at their home institution while taking coursework at t) institution. The <b>home school</b> , Robeson Community College (RCC), is the institution granting the student's oma, or certificate. The <b>host school</b> is the institution that the student is "visiting" under this agreement. The must be an approved Title IV school. The purpose of this agreement is to extend regular student status to RC ng pre-approved coursework at the host institution.
Student Ch	ecklist:
	Complete Section I of the agreement
	Meet with your Academic Advisor to have Section II completed. Please make sure you meet the following requirements:  • You are enrolled at RCC in an eligible program of study  • The courses approved to take at host school are required for your program of study
	Meet with a representative of RCC 's Financial Aid office to have Section III of this agreement reviewed and signed.
	RCC 's Financial Aid Office will submit the consortium agreement to your Host School for authorized signature(s). The host school faxes the completed form to RCC Financial Aid for processing.
	After completing the consortium term, you must request an academic transcript from the host school to be sent to the RCC Registrar's Office. Please note Satisfactory Academic Progress could be impacted if the transcript is not received or the courses are not successfully completed.
	A consortium agreement will not be processed for any student who is in a "Suspended or Probationary"

**Enrollment Status:** The student is responsible for informing the Financial Aid Office at *RCC* of their enrollment status at both institutions. RCC will award the student financial aid based on the enrollment status as determined by combining coursework to be taken at the host school and RCC. After classes begin, RCC will confirm actual enrollment and revise, if necessary, financial aid awards to reflect the actual enrollment status. The host institution will provide RCC with documentation supporting the students' enrollment status. This documentation must include credit hours enrolled, enrollment period beginning and ending dates, and list of specific courses the student is taking.

Disbursing and Distributing Aid: RCC will disburse Title IV Federal financial aid funds.

Satisfactory Academic (SAP) status.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison or both.



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eligible program of study at RCC.

Institution, including withdrawing from any or all courses.

Maintain Satisfactory Academic Progress standards at both institutions.

after the term completion.

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## Between Robeson And Community College (Host School) (Home School) **SECTION I:** To be completed by the student Name: \_\_\_\_\_\_ RCC Student ID: \_\_\_\_\_ Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_ City: State: ZIP Code: Consortium Term: Fall Spring Summer Academic Year: Do you plan to register at RCC during the consortium term? Yes / No If "Yes": How many hours do you plan to take at RCC? **Student Certification:** Be enrolled in an eligible program at RCC. Provide a copy of my schedule from the Host Institution to RCC • Provide a copy of payment receipt for tuition and fees at the Host Institution to RCC. • Take courses at the Host Institution that are pre-approved by RCC which are transferable to my

**Consortium Agreement** 

I have read the above Student Certification and understand my rights and responsibilities under this Consortium Agreement.

Submit an official academic transcript from Host School to RCC 's Registrar's Office within 30 days

Immediately notify RCC 's Financial Aid Office of any change in enrollment status at the Host

Authorize the Host School to release any information related to your enrollment and financial aid

Student's Signature Date

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SECTION II:  To be completed by the student's Academic Advisor					
intends to enroll in the following courses at  (Student's Name)  (Host school). These courses are the academic equivalent to					
	RCC Equivalent:				
Course:	RCC Equivalent:				
My signature below confirms that the course(s) to be taken at(Host school)  will be accepted as partially fulfilling the requirements of (Student's Name)  degree program at RCC.					
Academic Advisor Signature	Date				
	Phone Number Email Address AGREEMENT FOR YOUR RECORDS				
SECTION III:  To be completed by a RCC financial aid staff member.  My signature below affirms that I have gone over the terms of the consortium agreement with					
Student Name: RCC Student ID:					
The student meets the terms of this agreement and approved courses are required for student's program of study (degree audit).					
Financial Aid Staff Member Signature	Date				

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PLEASE FAX OR MAIL THIS FORM TO HOST SCHOOL AND KEEP COPY FOR OFFICE RECORDS



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To be completed by the Host School's Financial Aid Office					
Student Name:			Host School Student ID:		
<b>Enrollment Dates at</b>	Host School:	to_			
<b>Enrollment Period:</b>	Fall Spring	Summer _			
This agreement shall remain in effect during the enrollment period of this student or until canceled in writing by either institution.					
Please list below all courses that student plans to take at host school during the consortium agreement term and the numbers of credit hours per course.					
Course:		Credit Hours:			
Course:		Credit Hours:			
Course:		Credit Hours:			
	Tota	l Credit Hours	<b>::</b>		
<b>Cost of Attendance f</b>	or enrollment period state	d above:			
	Tuition: Fees: Transportation: Books and Supplies: Miscellaneous: Total Cost of Attendance	\$ \$ \$			
<ul> <li>As a representative of the host school you agree to:</li> <li>Confirm the student is in a transient/visiting status at your school taking courses that meet the Title IV, and State financial aid requirements</li> <li>Not award any federal, state, institutional, or private aid during the time the student is enrolled at your school</li> <li>Notify RCC immediately and supply the effective date(s) if the student withdraws or drops any hours reported in this agreement.</li> <li>Upon the student's request, facilitate the release of an official academic transcript to RCC Registrar's Office upon completion of the consortium term.</li> </ul>					
Host Financial Aid Staff Member Signature Date					
Printed Name and	Title		Office Phone		

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