

RCC OFFICE OF FINANCIAL AID

2021-2022 Consortium Agreement/ RCC Advisor Consent

If you are seeking a degree or certificate from Roxbury Community College (RCC) and plan to enroll at another school this semester, please complete this form, have your academic advisor sign it, and return it to the Office of Financial Aid. This consortium agreement will allow RCC to disburse financial aid based on your combined enrollment at both institutions. You will receive your financial aid through the RCC Office of Financial Aid. Funds/potential financial aid refunds do not transfer automatically; the student is responsible for paying the host institution. All disbursement activity happens in accordance with the RCC Financial Aid Calendar.

There is **no need to complete a Consortium Agreement if you are already enrolled full-time at RCC** as you will already receive the maximum amount of financial aid for which you are eligible.

Last Name _____ *First Name* _____ *M.I.* _____ *Student ID Number* _____

Email Address _____ *Telephone Number* _____ *Date of Birth* _____

Deadline to submit this Consortium Agreement: _____

Fall 2021: October 3, 2021
 Spring 2022: February 25, 2022
 Summer 2022: July 16, 2022

Semester: _____

Host Institution: _____

How many credits are you enrolled in at RCC this semester*? _____

Why are these courses not being taken at RCC? _____

***As a reminder, you do not need to complete this form if you are enrolled full-time at RCC.**

Please list the course(s) you are taking at the host school, course number, and the number of credits for each that will be transferred to RCC and count towards your RCC program of study.

Name of Course	Course Number	Credits

By signing below, I am confirming the credits the student is taking at the host institution will transfer back to RCC. In addition, the courses are applicable to the student's program of study and required for graduation.

RCC Academic Advisor's Signature _____ *Printed Name* _____ *Phone Extension* _____

RCC Email Address _____ *Academic Department* _____ *Date* _____

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2021-2022 Consortium Agreement/Host Institution Form

This student is seeking a degree or certificate from Roxbury Community College (RCC) and plans to enroll at the host school listed below. This consortium agreement will allow RCC to disburse financial aid based on the student's combined enrollment at both institutions. RCC is responsible for determining eligibility and awards, disbursing aid, monitoring academic progress, keeping records, returning funds, and federal reporting requirements. After all RCC charges are paid, RCC will refund any excess aid to the student. The student is responsible for paying the host institutions charges.

<i>Last Name</i>	<i>First Name</i>	<i>M.I.</i>	<i>Student ID Number</i>
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<i>Email Address</i>	<i>Telephone Number</i>	<i>Date of Birth</i>
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Student's Responsibilities

- Student must notify the RCC Office of Financial Aid if you do not enroll and/or complete these courses.
- Student must also submit Permission to Transfer Outside Courses form from their RCC Academic Advisor.
- Student understands and accepts responsibility for payment obligations at the host school.

By signing below, I acknowledge I have read, understand, and agree to abide by the terms and procedures of the consortium agreement. I hereby authorize the host institution to release the requested information to RCC on my behalf to complete this process.

<i>Student's signature</i>	<i>Date</i>
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HOST SCHOOL FINANCIAL AID OFFICE SECTION

Course Name (or attach schedule)	Course Number	Credits	Course Start Date	Course End Date	Last Day to Drop Course

Tuition and Fees: \$ _____

Room and Board: \$ _____

Transportation/Parking: \$ _____

Books and Supplies: \$ _____

Other: \$ _____

Total COA for Period: \$ _____

**Please fax the completed form
back to RCC at
855-647-9618**

The Office of Financial Aid of the host school agrees to complete this form, confirm enrollment, inform RCC if the student withdraws from these courses, and to not give the student any Title IV aid during this enrollment period.

<i>Authorized Signature</i>	<i>Printed Name</i>	<i>Phone Number</i>
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<i>Signatory's Title</i>	<i>Host Institution</i>	<i>Date</i>
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