



CONSORTIUM AGREEMENT

To be used by students who are degree seeking at MACC

Student's Name _____ MACC ID# _____

Complete Address _____
street city/state/zip

Telephone # _____ Date of Birth (mo/day/year) _____

Academic Year Enrolled at Host Institution: _____ Semester: () Fall () Spring () Summer

In order to receive federal, state and institutional aid at Moberly Area Community College, I understand I must submit the required FAFSA and all supplemental documents requested by the Financial Aid Office. I understand I must be degree-seeking at MACC and all classes in which I am enrolled, combined from MACC and the Host Institution, must be required for my MACC degree; I understand that this Consortium Agreement must be completed and signed by all parties and submitted to the MACC Financial Aid Office; I understand my Satisfactory Academic Progress evaluation performed at the end of this semester will include all courses in which I am enrolled (even if they are not eligible for financial aid). I have read and understand the additional guidelines listed on page two of this form.

I authorize MACC and _____ (Host Institution) to share information pertaining to my financial aid eligibility, student account, academic history (including transcripts).

Student Signature/Date

This is an agreement between **Moberly Area Community College** (the Home Institution, referred to as "MACC") and _____ (name of Host Institution)

SIGNATURE OF AGREEMENT BY HOST INSTITUTION

We agree to the terms and procedures stated on page 2 of this form. This student has been admitted at this institution as a visiting student, and is enrolled in the semester indicated below. A copy of the student's schedule is attached. A complete list of all institutional charges, tuition and fees (including room and board, if applicable) for the semester, is attached. The Host Institution agree that no financial aid will be processed for this student.

Enrollment period of Host Institution Begin Date _____ End Date _____

Student ID # at Host Institution _____ Number of credit hours enrolled _____

Complete Address of Host Institution _____

Contact Person Email Address _____ Phone Number _____

Printed Name

Signature/Date

CERTIFICATION BY MOBERLY AREA COMMUNITY COLLEGE

This is to certify that the student named above is a degree-seeking student at MACC. He/she has our permission to take the following courses, which are required as part of his/her degree program, at the Host Institution during the enrollment period indicated above and to transfer them back to MACC upon completion, to be applied toward his/her degree program.

Course Number:	Course Title:	Semester Credit Hours:

SIGNATURE: MACC Registrar

SIGNATURE: MACC Financial Aid Representative

NAME (printed or typed)

Date

NAME (printed or typed)

Date

This form must be completed by all parties and returned to the MACC Financial Aid Office before the beginning of the term, to provide time for processing and/or adjusting awards.



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Page 2

INSTRUCTIONS TO STUDENT

You must be a degree-seeking student in good standing at MACC. Your courses must be required for your degree program and must be approved by the Registrar at MACC.

You must do the following:

1. Provide your complete name, MACC student ID, mailing address, phone number, and email address. NOTE: you are responsible for updating this information in your permanent file.
2. Give this form to the Host Institution for completion.
3. Have the Host Institution complete their section of this form, as well as notify your lender of your enrollment status while you are a visiting student. This must be done to keep your loans in deferment.
4. Financial aid processed by, and received at, MACC will be applied to your balance due to MACC and any funds left will be available for you to pick-up in the Business Office at MACC. It is your responsibility to pay the charges on your account at the Host Institution. If you drop or change classes at the Host Institution, you must notify the Financial Aid Office at MACC immediately.
5. Notify the MACC Financial Aid Office of any change to your enrollment in the semester (withdrawals).
6. Provide MACC an official transcript from the Host Institution at the conclusion of the semester.

INSTRUCTIONS TO HOST INSTITUTION OFFICIALS

1. The student named on page one of the form has been admitted to MACC as a degree-seeking student.
2. MACC shall administer and disburse all financial aid for this student during the period of enrollment indicated below.
3. The student's financial aid award calculation will be based on the student's combined enrollment status at each institution;
4. The cost of attendance on which financial aid will be determined will be based on the student's tuition, fees, and room and board costs at each institution.
5. No financial aid will be processed by the Host Institution.
6. The Host Institution agrees to notify the MACC Financial Aid Office in the event of any change in the student's enrollment status. This agreement can be canceled by either institution upon written notification.
7. At the conclusion of each semester, the Host Institution will send an official transcript to MACC for monitoring of Satisfactory Academic Progress.
8. Please attach a copy of the statement of fees for the semester indicated on page 1. Include all institutional charges: tuition, fees and room and board charges.
9. Please provide a copy of the student's schedule for the semester indicated on page 1.
10. Please provide exact dates of enrollment for the semester in which the student plans to be a visiting student.
11. Please notify the MACC Financial Aid Office, within 14 days, if the student changes his/her schedule or drops a class.
12. By signature on this form, you certify that the student is enrolled as a visiting student at your institution and that no financial aid will be processed for the student while attending as a visiting student.

INSTRUCTIONS TO MACC OFFICIALS

1. The Registrar must sign this form, certifying the student named on page 1 has permission to take the courses listed at the Host Institution and the courses are required for the student's MACC degree.
2. A representative of the MACC Financial Aid Office must sign this form, certifying the student named on page 1 has permission to attend the Host Institution and the MACC Financial Aid Office will process financial aid for this student for the semester indicated.
3. MACC will review financial aid eligibility for this student and will collect and retain all records needed to determine eligibility for federal, state and institutional financial aid programs (including grants, loans, scholarships and work-study).
4. MACC will combine the enrollment status at each school to determine eligibility.
5. MACC will calculate the Cost of Attendance using the student's tuition, fees, and room and board from each school, in addition to the standard allowances MACC uses for books/supplies, miscellaneous and transportation.
6. MACC will issue an award letter to disclose financial aid programs awarded, disbursement dates, and the terms of financial aid being awarded. Additionally, the award letter will provide policies for Satisfactory Academic Progress and the Return to Federal Funds for dropped classes.