

Application for Consortium Agreement

As per the Federal Student Financial Aid Handbook 2018/2019, USDE, Volume 2, Chapter 2, page 34, and Part 668.5, Code of Federal Regulations, this Consortium Agreement is entered into between Rocky Mountain College (RMC), the home institution, and the host institution named below. As the home institution, Rocky Mountain College will provide federal financial aid funds to the student named below for the period of study in question. This completed document must be on file with all concerned parties before the start of instruction.

Part I: TO BE COMPLETED BY THE STUDENT

Name:

- 1. I have exercised all academic options at RMC before taking credits at the host institution.
- I am responsible for notifying the Financial Aid Office at RMC of any changes in enrollment status at either institution within 10 days. 2. 3. I will be responsible for obtaining an official transcript of credits taken at the host institution to RMC within 15 days after the date the

______SSN: ______

- term ends.
- I understand my RMC scholarships will be prorated to reflect my enrollment at RMC. 4.
- 5. I have attached a statement explaining why I must take the class(es) listed below at the host institution.
- I have attached a copy of the class schedule and billing statement from the host institution. 6.

_____ _____

Dates of visiting enrollment requested: From: ______ To: ______

Name and complete address of person at the host institution aid checks should be forwarded to if funds are available:

In addition, I authorize the host institution to release enrollment, financial aid, and academic information to RMC.

Student Signature: _____ Date: _____

Part II: TO BE COMPLETED BY ACADEMIC ADVISOR AT ROCKY MOUNTAIN COLLEGE

Course Prefix Number	Course at Host Institution (List titles below)	Credit Hours

I have reviewed the course of study and the above course(s) will be acceptable for transfer and will count toward the student's degree at Rocky Mountain College.

Academic Advisor Signature: Date

PART III: TO BE COMPLETED BY RMC STUDENT RECORDS OFFICE

I have reviewed this student's course of study and confirm that the above course(s) will be acceptable for transfer and will count toward the student's degree at RMC if the student earns a grade of D or better.

RMC Student Records Officer Signature

Date

Part IV: TO BE COMPLETED BY THE HOST INSTITUTION

Detailed institutional budget for campus-based financial aid for the period of enrollment:

TUITION & FEES ROOM & BOARD BOOKS & SUPPLIES TRANSPORTATION OTHER (SPECIFY)	\$ \$ \$ \$		
Number of credits at Host Institution	Dates of Enrollment From	То	
CEDTIFICATION			

CERTIFICATION

- A. The Host Institution certifies that the above-referenced student is enrolled for the stated period of attendance.
- B. The Host Institution agrees that it will not pay the student a Pell Grant and/or any campus-based funds and that it will not certify a Federal Loan for the stated period of attendance. Further, the Host Institution agrees that it will inform Rocky Mountain College if the student withdraws before the end of the stated period of attendance as well as providing amended cost of attendance figures.
- C. Rocky Mountain College agrees to accept the credits earned at the Host Institution with the proper approval from the Student Records Office if the student earns a grade of D or better.
- D. Rocky Mountain College agrees to provide payment to the student, if eligible, under the programs listed below for the stated period of time.
- E. Rocky Mountain College agrees to monitor the student's program pursuit and satisfactory academic progress, to be responsible for disbursing funds to the student and for administering the appropriate refund policy.

Host Institution's Signature	 	······································
Title	 	
Name of Host Institution	 	
Address	 	

Please return this form to the Rocky Mountain College Office of Student Financial Assistance. Please keep a copy for your reference.

PART V: TO BE COMPLETED BY RMC FINANCIAL ASSISTANCE OFFICE

Rocky Mountain College agrees to the terms stated above and authorizes the release of financial aid funds to the person designated by the student above. Financial aid awards to be received by the student for the stated period of attendance are as follows:

Pell Grant	\$	Other	\$
FSEOG	\$		\$
Direct Sub Loan	\$		\$
Direct Unsub Loan	\$		\$
RMC Financial Aid O	fficer Signature _		
Title		Date	

1511 Poly Drive, Billings, MT 59102 Phone: 406-657-1031 Fax: 406-657.1189