



Consortium Agreement Contract

Purpose of this Form: A Consortium Agreement is necessary for students enrolled in degree-seeking programs at Bluefield College (Home Institution) to receive financial aid while temporarily attending another accredited higher education institution (Host Institution). The agreement allows Bluefield College to disburse financial aid based on combined enrollment at both institutions. **Each consortium agreement is only valid for the specific semester indicated.**

Conditions of this Agreement: Students are not permitted to receive federal or state financial aid through more than one institution at the same time. By completing this consortium agreement, the Host Institution agrees to defer to Bluefield College and not process any federal or state aid in your name.

Eligibility Requirements: To be eligible for a consortium agreement, you must have completed a FAFSA, meet all federal aid requirements, meet Satisfactory Academic Progress (SAP), and the courses taken at the Host Institution must qualify for transfer credit towards your current degree program at Bluefield College. If your Host Institution refuses to complete the consortium agreement, there is no appeal process.

Disbursements: Your financial aid will be disbursed at Bluefield College according to federal and state regulations and institutional policies. Student must provide a copy of billing Statement from Host Institution before any funds are released. Funds are not transferred from one school to another; if your charges at the Host Institution are due before you receive your aid refund from Bluefield College, it is your responsibility to pay them by other means. We strongly encourage you to contact the other institution to discuss payment deadlines and options. Students are responsible for payment of all charges at their Host schools.

Enrollment: You must notify Bluefield College Financial Aid if you drop or withdraw from any courses at the Host Institution. When your enrollment level changes, Bluefield College is required to review your aid eligibility and, if necessary, adjust it according to the Department of Education's Return of Title IV Funds requirements. You may lose eligibility for some, or possibly all, of your initial financial aid disbursement, creating a balance due. When you notify the Financial Aid Office of enrollment changes, include the names of the courses in question, their scheduled start and end dates, and the date(s) you dropped or withdrew from them.

In order for a Bluefield College Consortium Agreement to be approved, **all** of the following must be submitted to the Bluefield College Financial Aid Office by the Missing Document Deadline specified each semester.

Required Task

- o Complete a FAFSA for the correct academic year. Be sure to use Bluefield College federal school code, **003703**.
- o Submit your completed *Consortium Agreement Contract*, which must be filled out and signed by both you and a certifying official at the Host Institution.
- o Provide Bluefield College Financial Aid Office with a copy of your completed *Transient Course Approval* form, approved and signed by Bluefield College Registrar's office.
- o Student must register themselves at the Host Institution.
- o Provide Bluefield College Financial Aid Office with a copy of your Class Schedule. Class schedule must show the begin and end date of each course you are taking.
- o Provide Bluefield College Financial Aid Office with a copy of the Host Institution Billing Statement.
- o Proved Bluefield College with an official copy transcript from Host Institution

Please return completed documents to Bluefield College Financial Aid



Period.

Institution.

Student ID number					

Consortium Agreement Contract

Instructions: Please complete Section I of this form before forwarding it to the Host Institution for completion of Section III and Section IV. Consortium agreements are valid only for the specific period indicated. A separate agreement is required for each individual academic term.

Section I: STUDE	ENT INFORMATION (T	o be completed by the	e Student)	
Name of Student:			Last four of SSN	:
Name of Host Institution	on:			
Consortium Period	Calendar year: 20 A	cademic term: [circle one	e] Summer Fa	ıll Spring
Section II: Course	s you will be taking at H	ost Institution		
Course Number	Number of Credit Hours	Course Name	Beginning Date	Ending Date
completion of a degree fees or other expenses enrollment and acknow Institution at the concl	wledge that I am responsible lusion of the consortium per lege with the information r	uefield College. I understree to inform the Bluefie for providing Bluefield iod. I authorize the Hos	stand that I am responded College Financial A College with an office of Institution to conf	sible for paying any tuition, Aid Office of any changes in tial transcript from the Host
Complete the officially grantNotify the Blu		ndemic Advising. Office of any changes in	my enrollment level	

Have all of my federal and state financial aid processed only at Bluefield College for the duration of the Consortium

Submit an official transcript to Bluefield College no more than 30 days after the end of my classes at the Host

Take responsibility for payment arrangements at the Host Institution.



1					
Student ID number					

Section III: HOST INSTITUTION INFORMATION (To be completed by the Host Institution)

Name of Host Institution:

The student listed above is seeking a degree or certificate from Bluefield College and plans to enroll at your Host Institution. The student wishes to use financial aid funds to help cover the course(s) listed as part of their Consortium Agreement. As the student's Home Institution, Bluefield College will be responsible for determining eligibility of awards, disbursing aid, monitoring academic progress, keeping records, returning funds, and reporting federal requirements. This Consortium Agreement will allow Bluefield College to disburse financial aid based on the student's combined enrollment at both institutions. Once any balance due Bluefield College has been paid, Bluefield College will refund any excess financial aid to the student. Funds are not transferred from one school to another; the student is responsible for payment of all charges at the Host Institution. The Host Institution agrees to provide Bluefield College with the following information.

Tuition:

Enrollment Period: Summer 20 Fall 20 Spring 20 Dates of Enrollment: from to (MM/DD/YY)	Fees: Room and Board: Books and Supplies: Miscellaneous: Total Cost of Attendance:	\$
Number of Credits Enrolled In:		
Section IV: HOST INSTITUTION CERTIFICATION The Host Institution agrees NOT to process federal student aid for the	student named in Section I.	
Name and Title of Authorized Official		
Signature (must be signed by hand, not typed)	Date	
E-mail Address		
Telephone Number		
Section V: BLUEFIELD COLLEGE CERTIFICATION		
Director of Financial Aid	Date	
Registrar	Date	