Financial Aid Office
P.O. Box 19000 | Portland, OR 97280-0990
Telephone: (971) 722-8888 #4
Fax: (971) 722-4965

Financial Aid Consortium Agreement

Use this form if you are enrolled at PCC and another college or university and want to receive your financial aid through PCC. When you are concurrently enrolled in more than one school, you can have your credits combined to determine enrollment status. Classes taken at the other college must count toward the completion of the degree or certificate requirements you are pursuing at PCC. You must meet with your Academic Advisor to ensure these credits will apply to your declared program of study. If you plan to be co-enrolled more than one term, you must submit a new Consortium Agreement each term.

Part I: Student Information (to be completed by the student)

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Host School Name

( ) Student Phone

Which term and year do you plan to be concurrently enrolled? _________

Term

Year

Please read the requirements below and sign to agree / acknowledge your responsibility. I understand that:

1. All steps of this consortium agreement must be completed in full.
2. I am required to be enrolled with PCC in at least 6 credits.
3. I can only be enrolled in 100 and 200 level courses at my HOST school -- these courses must apply to my degree with PCC and be transferable.
4. I am required to provide PCC with a copy of my registered courses at the HOST institution along with this form.
5. A PCC Academic Advisor must certify the coursework at the HOST institution is applicable to my PCC degree. (This will be completed in Step 2 of this form)
6. I have to cancel any aid awarded by the other institution by contacting their financial aid office.
7. I am responsible for the payment of any bill at my HOST school by their due date - check the HOST school's policy.
8. Financial Aid will be awarded and paid through PCC and will be subject to PCC's disbursement policies and schedule.
   *Consortium Agreements can cause a delay in disbursements, please plan accordingly.
9. It is my responsibility to report any enrollment changes at both institutions during the term. All courses included in this consortium agreement will be subject to PCC's SAP and Title IV Return policies.
10. I must provide PCC a copy of my transcript from the HOST school, showing completion of courses taken for the term. PCC will hold future financial aid disbursements until the transcript is received.

______________________________  ________________  ________________
Student Signature

Date

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**Part II: Host School Information (to be completed by the financial aid office at the other school)**

Term and Year Concurrently Enrolled: _______________________________________________

Host school's term start and end dates: ____________________________

I confirm that the enrollment listed in Part II is accurate and financial aid will not be paid for the concurrent term at ____________________________________________.

(Name of HOST College or University)

_____________________________________________________________ / / 
Signature of Certifying Financial Aid Official Date

_____________________________ Phone
Title @

Email

**Part III: Host School Information (to be completed by the financial aid office at the other school)**

Term and Year Concurrently Enrolled: _______________________________________________

Host school's term start and end dates: ____________________________

I confirm that the enrollment listed in Part II is accurate and financial aid will not be paid for the concurrent term at ____________________________________________.

(Name of HOST College or University)

_____________________________________________________________ / / 
Signature of Certifying Financial Aid Official Date

_____________________________ Phone
Title @

Email

**Part IV: PCC Financial Aid Certification (to be completed by PCC Financial Aid Staff only)**

☐ Approved ☐ Denied

_____________________________________________________________ / / 
PCC Staff Signature Date

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