



Kirkwood Community College
 6301 Kirkwood Blvd. S.W.
 Cedar Rapids, IA 52404

Financial Aid Consortium Agreement

This is an agreement between Kirkwood Community College (Home Institution) and _____ (Host Institution) on behalf of the student named below.

Part 1: To be completed by Host Institution

Student's name: _____ SSN or k number: _____
 Major: _____

Part 2: To be completed by Host Institution

Name of Course	Catalog Number	Number of Credits	Period of Enrollment

Total Credit Hours Enrolled: ____ Terms are: Semester Quarter Other (specify) _____

Tuition & Fees \$ _____
 Books & Supplies \$ _____
 Room & Board \$ _____
 Personal \$ _____
 Transportation \$ _____
 Total: \$ _____

Part 3: To be completed by Home Institution:

Consortium is accepted / denied because _____

Part 4: Certification

The Home Institution agrees to provide payment(s) to above-mentioned student, if eligible, under Title IV programs as appropriate for term(s) specified above.

The Host Institution agrees not to provide Title IV Program payments to above-mentioned student during term(s) specified and further agrees to notify the Home Institution of the student's withdrawal from all classes at that institution prior to the conclusion of the term(s) specified above.

 (Financial Aid Representative: Home Institution)

 (Financial Aid Representative: Host Institution)

Consortium Check List and Student Agreement

(Student should fill out this page)

Print Name _____ Semester/year _____

Please read the following Student Agreement and sign below.

- Your financial aid will be given by the institution from which you will receive your degree. If you plan to enroll simultaneously at Kirkwood and another institution, you should apply for financial aid at the school from which you will graduate. That school is the “home” institution and should process a consortium agreement with the other school (the “host” institution).
- The purpose of this consortium agreement is to ensure disbursement of the full amount of financial aid from Kirkwood. Consortium agreements will not be processed unless it is necessary for you to receive the full amount of financial aid. If you attend the other institution for more than one semester, a consortium agreement must be done for each semester.
- If you enroll simultaneously at Kirkwood and another institution, the total enrolled credits hours between the two schools will be used to determine your financial aid eligibility. You must be enrolled at least half time to qualify for student loans. Grants are pro-rated based on the total enrolled credits at the two schools. **Maximum hours accepted can be no more than the credits necessary for your degree at Kirkwood and must meet degree requirements.**
- You must apply and be eligible to receive financial aid at Kirkwood and may not receive financial aid from the other school.
- If there are any past-due charges on your Kirkwood account or other restrictions on your registration, you may not register for classes. You need to remove all restrictions before financial aid can be disbursed to you.
- You will be responsible for paying all program fees at the other institution from any financial aid that will be sent to you based on the Kirkwood disbursement dates. If you do not receive a refund, you are still responsible to pay the other institution. **Kirkwood does not make payments directly to the other institution.**
- If you receive financial aid from Kirkwood for classes at another institution, it is your responsibility to provide an official academic transcript of these courses to the Kirkwood One Stop Office. **No additional consortium agreements will be processed until the official transcript is received.**

I certify that I have read and understand the preceding information and agree to provide a transcript from the other institution as soon as possible after classes are complete. I also agree to inform the Kirkwood One Stop Office if I withdraw from any courses at the other institution.

I plan to register at Kirkwood for _____ hours and at (other college) _____

for _____ hours during the (semester/year) _____ / _____ semester.

Signature

SSN or k number

Date