

Eastern Oregon Collaborative Colleges Center (EOCCC)
Blue Mt. Community College & Eastern Oregon University & Treasure Valley Comm. College
Student Title IV Federal Financial Aid Consortium Agreement

Home Institution: The institution from which you are seeking a degree and from which you intend to receive financial aid.
Host Institution: The institution(s) where you are taking courses that apply towards the degree from the Home Institution.

Select your **HOME** school:

Blue Mountain Community College
Financial Aid Office
Fax: (541) 278-5889

Eastern Oregon University
Financial Aid Office
Fax: (541) 962-3661

Treasure Valley CC
Student Services Center
Fax: (541) 881-2721

Students must complete a new consortium agreement every academic year.

Mark the terms you will be a consortium student: Summer 2015 Fall 2015 Winter 2016 Spring 2016

Complete and sign the *Student Certification* section below and mail or fax this form to the "Host Institution." Please print.

Name: _____ **Email:** _____ **Phone:** _____

HOME SID#: _____ **Host SID#:** _____

My HOST school(s) will be: Blue Mountain CC Eastern OR Univ. Treasure Valley CC

Student Certification - By signing this agreement I understand that:

1. You must **attach a copy of your registration or class schedule at the host school**. The financial aid office at your host school must document your registration, tuition, & fee costs and sign this form.
2. **You must be taking a minimum of 6 credits for the entire term** to be eligible to receive and keep your financial aid. If you drop **any** courses, your financial aid could be returned, creating a balance on your student account.
3. An Academic Advisor must certify that the coursework at the host institution is applicable to your degree plan.
4. You must enroll in 100 level coursework or higher.
5. Courses taken at the host school will be treated the same for Satisfactory Academic Progress (SAP).
6. You must submit an official transcript from the host school at the end of Spring term. We will hold financial aid for future terms until we receive the transcript.
7. It is your responsibility to report changes in enrollment during the term. If you drop all courses at both schools, the home school will perform a Return of Title IV Funds calculation and may return funds to federal accounts. This could result in a bill on your student account.
8. Financial aid will be disbursed according to the home school disbursement schedule. Consortium agreements can cause a delay in disbursements, so plan accordingly.
9. You are responsible for paying tuition, fees and other charges at the host school.
10. You understand and authorize both schools to share information about your educational records.
11. The home school will only accept consortium agreement forms through the second week of the term.

Student Signature _____ Date _____

I certify that the courses the student is enrolled in at the Host school are applicable to the student's program of study; the student has not previously earned credit for these courses; and if the student has an AA or AAOT, that s/he must have these courses to complete her/his degree program at the Home school.

Academic Advisor Signature _____ Date _____

The "Home Institution" agrees to pay Title IV Federal Financial Aid to the above mentioned student based on the information provided in this Student Title IV Federal Financial Aid Consortium Agreement.

Home Institution Representative _____ Date _____

Host Institution Representative _____ Date _____

Rev: 4/2014, 1/2014, 4/2013, 4/2012, 5/2011, 5/2010, 1/2010, 11/2009