



## CONSORTIUM AGREEMENT

The purpose of this Consortium Agreement is to establish that (“home” institution) Pierce College and (Host institution (2<sup>nd</sup> college/university): \_\_\_\_\_ considers Student Name: \_\_\_\_\_ EMPL: \_\_\_\_\_ enrolled in an eligible program and accepts those credits earned at \_\_\_\_\_ for credits toward the student’s degree at Pierce College.

Pierce College will be responsible for awarding and disbursing all aid for the period covered by this agreement, and the home institution’s refund/repayment and academic satisfactory progress policies shall apply. The cost of attendance will be based on the home institution’s costs and the home institution will retain records.

\_\_\_\_\_ Host institution) agrees not to award financial aid to the student for the period of this Agreement.

Total credits at host institution: \_\_\_\_\_

This agreement is effective: \_\_\_\_\_ Quarter

My signature below certifies that:

1. I have registered for the “host” institution named above for credit applicable to my degree requirements.
2. I will provide a copy of my grades from the “host” institution named above to the Registrar at Pierce College upon completion of the course work. I will also request an official grade transcript to be sent from the “host” institution to Pierce College upon completion of the term.
3. I understand that charges from classes taken at the “host” institution named above are my responsibility and payment must be made by me according to the payment policy of the “host” institution.
4. I will not accept financial aid from any institution other than Pierce College during the enrollment period.
5. I will notify Pierce College Financial Aid Office immediately if I drop, withdraw, or in any way change enrollment.
6. I will attach a list of course(s) being taken at the host institution or attach a copy of my enrollment.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Signed and Date:

\_\_\_\_\_  
Financial Aid Administrator  
(Host Institution) ☐

\_\_\_\_\_  
Financial Aid Program Manager  
Pierce College  
Fax: 253-964-6427

\_\_\_\_\_  
Print Name:

\_\_\_\_\_  
Print Name