# <u>H</u>OLYOKE <u>C</u>OMMUNITY <u>C</u>OLLEGE

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303 Homestead Avenue Holyoke, MA 01040 413.538.7000 Financial Aid Office Phone: (413) 552-2150 Fax: (413) 552-2192

### **Consortium Agreement Information**

At Holyoke Community College, we want to make sure that everyone has an equal chance to go to college, no matter who they are. We know that getting money to pay for college is important, so we promise to be fair when we give out financial aid. We also want to make sure that trans and gender-expansive students don't face any barriers in accessing financial aid. If you have questions or concerns about this, you can talk to the financial aid office.

This consortium agreement is a binding agreement between eligible schools which enables a student to receive financial aid from Holyoke Community College while being enrolled as a visiting student at another school. **HCC** is considered your home school and the visiting school is referred to as the host school. The host school must be an approved Title IV school; meaning they have a federal Title IV school code and can process federal financial aid. School eligibility can be verified online at https://fafsa.ed.gov/FAFSA/app/schoolSearch.

Students *may* be eligible to receive financial aid for courses taken at another college under certain limited circumstances. They may request that the HCC Financial Aid Office review the need to include an outside course in the determination of their financial aid eligibility at Holyoke Community College.

Examples of acceptable circumstances for a consortium agreement to be granted include, but are not limited to; a required course for degree completion not being offered at HCC, or a required course not being offered in the format necessary for student success.

#### Instructions

- 1. A student must submit a type-written request explaining the necessity of taking a course at another college and attach the statement to this form.
- 2. The request will be evaluated by the Financial Aid Office and a decision will be made as to whether or not the request will be approved.
- 3. The student must complete and sign Section I and have Section II signed by the Student Records Office. A "Transfer Credit Prior Approval Form" should also be obtained from the Student Records Office and attach it to the Consortium Agreement Request Form before submitting the form to the Financial Aid Office.
- 4. Once the consortium agreement and type-written request have been reviewed by the Financial Aid Office the student will be sent notification of the decision to their HCC email account.

- 5. If the request is approved the Financial Aid Office will forward the consortium agreement to the Host school for completion.
- 6. It is the responsibility of the student to pay required tuition and fees at the Host school and will be reimbursed (to the extent of the student's eligibility) by Holyoke Community College when the student's financial aid is awarded and disbursed.

## **Consortium Agreement Request Form**

### Section I: Student Information- To be completed by the student

Student ID#:
Date of Birth:
Enrollment Period:
e this course at another institution, ie., course not or to graduation, course not offered at HCC in the e Community College.  To his or her HCC degree or certificate as certified of begin attendance in the courses listed and cial Aid Offices of any change in enrollment ution of approved courses.  School academic transcript upon completion of occess prior to all applicable deadlines.  Items and/or Host School.
Date:

Home School: Holyoke Community College	
Host School:	
Section II– To be completed by the HCC Stu-	dent Records Office
List the approved course(s) that the student is ta academic program at Holyoke Community Coll	aking at the Host School which are applicable to his or her ege:
Course Name:	Course Credits:
Course Name:	Course Credits:
Course Name:	Course Credits:
listed above.	above toward the completion of the student's degree or certificate
Printed Name:	
Section III – To be completed by Holyoke Co	ommunity College financial aid officer
Under this consortium agreement, Holyoke C	
<ul><li>(if eligible) as appropriate for the conso</li><li>2. Certifies the student is making satisfact or certificate at Holyoke Community Co</li></ul>	ory academic progress toward the completion of his or her degree ollege. he National Student Loan Data System (NSLDS). , when appropriate.
HCC Financial Aid Officer's Signature:	

Printed Name:	Date:
Email Address:	Telephone:
Section IV – To be completed by the Host School fina	ncial aid officer
Enrollment period dates: From:	To:
Cost of Attendance:	
Tuition & fees: \$	_
Books & supplies: \$	_
Transportation: \$	_
Miscellaneous: \$	_
Under this consortium agreement, the Host School:	
School. 3. Agrees to notify Holyoke Community College if withdraws from, the Host School (including the	documentation of the student's enrollment at the Host of the student fails to enroll in, begin attendance in, or withdrawal date and other relevant information).  a Host School academic transcript upon completion of
Host School Financial Aid Officer's Signature:	<del></del>
Printed Name:	
Title:	Date:
Email Address:	Telephone: