



Student Financial Services
Financial Aid Office Bldg. 37
1833 West Southern
Mesa, AZ 85202
(480) 461-7441
FAX (480) 461-7815
<http://www.mc.maricopa.edu>

**Mesa Community College
Student Financial Services**

Consortium Agreement Information

Counting the credits from another school as part of your total enrollment for financial aid purposes may be possible by doing the following:

1. Enroll at the participating school by the end of the Mesa Community College Drop/Add period.
 - All grant and student loan consideration requires an enrollment of 6 credit hours at Mesa Community College.
2. Submit to Student Financial Services a completed Consortium Agreement no later than the specified deadline.

Fall due date: August 24, 2011

Spring due date: January 19, 2012

3. Submit a copy of the semester grade report to Student Financial Services at the end of the semester.
4. Financial Aid is available from only one school during a semester.

LATE START DATE OF CLASSES WILL DELAY FINANCIAL AID FUNDS

INSTRUCTIONS:

- Obtain a consortium agreement form from the PARENT school and complete as instructed.
- Obtain an advisor's signature from PARENT school approving the classes selected
- Obtain confirmation of enrollment from the PARTICIPATING school's financial aid office
- Return agreement to the PARENT school for final approval prior to end of schedule adjustment period.

TERMS:

- Student must be registered at the PARENT school prior to submitting this form.
- Student is responsible for making payment arrangements at participating school.
- Student is responsible for providing the PARENT school with current enrollment status.
- Student is responsible for providing final grades at the close of the semester.
- Any changes to enrollment of classes, please notify our office immediately.
- Student must maintain 6 credit hours of enrollment at MCC for consortium to be valid.

Chandler-Gilbert Community College • Estrella Mountain Community College • Gateway Community College •
Glendale Community College • Maricopa Skill Center • Mesa Community College • Paradise Valley Community College •
Phoenix College • Rio Salado College • Scottsdale Community College • South Mountain Community College

CONSORTIUM AGREEMENT

Student Name _____
 Student ID Number _____ Semester and Year _____
 Parent Institution _____ Participation Institution _____

The purpose of this agreement is to ensure that the student receives the financial aid for which he/she is eligible.

COMPLETION INSTRUCTIONS

1. Complete Consortium Agreement form from the PARENT school as instructed.
2. Obtain an advisor's signature from the PARENT school certifying that courses are included in your program of study.
3. Obtain signature confirming enrollment & certification that no financial aid will be paid from the PARTICIPATING school's financial aid office.
4. Return agreement to the PARENT school for final approval **by deadline date determined by the PARENT school.**

TERMS OF AGREEMENT

1. **Student is responsible for making payment arrangements at participating school.** Participating school may require payment of your tuition and fees by their due date. Check the PARTICIPATING school's policy.
2. The student will be funded by the PARENT school, and all financial aid records for the period will be maintained in the financial aid office at that school.
3. The student will be responsible for maintaining enrollment for the period of this agreement at the Participating school and may be required to provide final grades at the close of the semester specified by this agreement in order to receive financial aid for future semesters.
4. Student may be required to provide the PARENT school with confirmation of above enrollment at the PARTICIPATING school.
5. These courses will be subject to MCCCDC Financial Aid Standards of Satisfactory Academic Progress.
6. This agreement is valid only for those courses listed below. Any changes may require a new agreement be processed.
7. The student may be required to be enrolled at the PARENT school prior to submitting this form. **The Parent school may require a minimum enrollment level.** Check the PARENT school's policy.

CERTIFICATIONS

I have read and understand the above information.

Subject Code	Course title	Credit hours	Distance Learning Class	Start Date	End Date	Date Registered

I certify that the courses listed above apply to the student's program of study, which is _____

 Academic Advisor at the **PARENT** school Date

I confirm above enrollment is accurate and financial aid will not be paid from our institution (participating school)

 Financial Aid Office at the **Participating** School Date

 Financial Aid Office at the **Parent** School Date