



One College Hill Road  
Newton, NJ 07860  
973-300-2225 Fax 973-300-2224

### **CONSORTIUM AGREEMENT PROCEDURES**

Students wishing to take course(s) at another institution as part of their program of study at Sussex County Community College should follow the steps outlined below. The fully executed Consortium Agreement and all paperwork related to the process of financial aid must be completed and on file at SCCC prior to the enrollment period in which you plan to attend.

1. Complete and submit the Permission for Transient Study form available in the SCCC Registrar's Office.
2. Student completes the student section on page one of the Consortium Agreement Form and submits the entire form (pages 1 & 2) to the Financial Aid Office at the Host Institution.
3. After the agreement is returned to the SCCC Financial Aid office, a copy will be sent to the SCCC Registrar's office. Additionally, your financial aid eligibility will be reviewed based on the actual or anticipated costs of the consortium courses and the courses taken during the same semester at SCCC. Financial aid adjustments may be made, depending on changes in the number of credits enrolled for at the host institution. The Financial Aid staff will work with you to determine what aid, if any, is approved.
4. You (the student) should make payment arrangements with the Host Institution. If the Host Institution is willing to defer any or all of the direct tuition cost based on expected financial aid, you should understand that no payments will be made to you (the student) by the SCCC Bursar's Office until aid has been credited to your account. **NO PAYMENT** will be sent directly to the Host Institution from SCCC. It is the student's responsibility to pay the tuition and fee charges incurred at the Host Institution. Proof of attendance is required from both SCCC and the Host Institution if attending both within the same term.
5. If you do not complete the course(s), you are expected to follow appropriate procedures to "Officially Withdraw". **DO NOT SIMPLY STOP ATTENDING.**
6. Once your attendance is verified at both institutions, your expected aid will be disbursed.
7. Upon completion of the semester, you must have an official academic transcript sent from the Host Institution to the SCCC Registrar's Office.



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**CONSORTIUM AGREEMENT**

Per Federal Regulations, a Consortium Agreement must exist before a home institution can process an application for federal funds at another institution. Therefore, the two institutions named below herein enter into a Consortium Agreement for:

Student's Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

INSTITUTIONS: Home Institution: Sussex County Community College  
Host Institution: \_\_\_\_\_  
Semester/Year: \_\_\_\_\_

Indicate the number of credits for which you will be enrolled:

At SCCC: \_\_\_\_\_ At Host Institution: \_\_\_\_\_

- I understand that I must complete and submit a "Permission for Transient Study" Form to receive written permission from SCCC's Registrar to take classes at the above institution. Only approved courses will be considered for financial aid purposes.
- I understand that it is my responsibility to make payment arrangements for all charges generated by my Host Institution.
- I understand that I must complete and submit all financial aid documents including all Federal/State Verification documents before financial aid funds can be disbursed.
- I agree to promptly notify SCCC if I withdraw from the semester before its conclusion. I further agree to request from the Host Institution an academic transcript to be sent to SCCC at the conclusion of the semester.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by the Host Institution:**

Student Name: \_\_\_\_\_  
Enrollment Status at host institution: \_\_\_\_\_  
(i.e. full time, 3/4 time, 1/2 time, less than 1/2 time).

**Cost of attendance at Host Institution:**

Tuition \_\_\_\_\_  
Fees \_\_\_\_\_  
Books and Supplies \_\_\_\_\_  
Room and Board \_\_\_\_\_  
Personal/Misc. \_\_\_\_\_  
Transportation \_\_\_\_\_  
**TOTAL** \_\_\_\_\_

Aid awarded by host institution (if none enter "NONE")

Grants \_\_\_\_\_ Type: \_\_\_\_\_  
Loans \_\_\_\_\_ Type: \_\_\_\_\_  
Other \_\_\_\_\_ Type: \_\_\_\_\_

**CERTIFICATION:**

1. The Host Institution certifies that it is eligible to participate in Federal Student Financial Assistance Programs.
2. The Host Institution agrees that it will NOT pay the student a Federal Pell Grant and/or any campus-based funds and that it will NOT certify a Federal Direct Subsidized/Unsubsidized and/or Federal Direct PLUS loan during the period of attendance.
3. SCCC agrees to accept the credits earned at the Host Institution as approved by the visited campus.
4. SCCC agrees to process aid for the courses indicated if eligible.
5. SCCC agrees to monitor the student's program pursuit and satisfactory academic progress and to be responsible for disbursing funds and for administrating the appropriate refund policy.
6. SCCC agrees to provide payment to the student for any financial aid for which the student is eligible for during the academic period.
7. The student on consortium understands that all aid documents including Verification documents must be completed along with the receipt of her/his proof of attendance to the Financial Aid Office before the release of funds.

**SIGNATURES:**

**Sussex County Community College:**

**Host Institution:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Financial Aid Officer**

\_\_\_\_\_  
**Signature of Financial Aid Officer**

\_\_\_\_\_  
**Print Name of FAO**

\_\_\_\_\_  
**Print Name of FAO**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Phone Number**