

Financial Aid Office

893 West Street Amherst, MA 01002 413.559.5484 fax 413.559.5585

Student's Legal Name: _____ Last Four of SSN: _____
Student's Preferred Name: _____ Student ID #: _____

Consortium Agreement

As allowed under Federal Regulations, this Consortium Agreement is entered into between the accredited and eligible institutions listed below for the purpose of providing federal financial assistance to the student named below. Federal assistance includes all Title IV Programs.

This agreement is entered into between: **HAMPSHIRE COLLEGE** (the Home School) **and**

NAME of the Host School: _____

Consortium school of record or OPE ID: _____

Contact Name: _____ Contact Email: _____

To Be Completed by Host School

Name of Program _____

Enrolled from _____ to _____ Program length of _____ weeks or _____ quarters or _____ semesters

Student status of _____ full time _____ half time

Pell Grant cost of attendance: \$ _____

Tuition and fees: \$ _____

Housing and Food: \$ _____

Other: \$ _____

Financial aid from consortium school: \$ _____

Certification

By signing below, the *HOST SCHOOL* certifies that the student has been accepted for enrollment in the program listed above.

The *HOST SCHOOL* certifies they are accredited by a US accrediting agency and a TITLE IV eligible institution. The *HOST SCHOOL* agrees not to pay the student any Title IV assistance including Pell Grant or Campus Based aid nor to process a Federal Direct Loan (subsidized, unsubsidized or PLUS) during the enrollment period listed above. The *HOST SCHOOL* agrees to notify the home school if the student withdraws from the program before its conclusion. Satisfactory completion of the program will be evidenced by academic transcript upon written request by the student.

By signing below, the *HOME SCHOOL* agrees to calculate the student's financial aid eligibility using the costs stated above, process federal financial aid applications and to pay the student during the time period listed above. Payment will be made in the manner agreed to by the home school and the student.

HOME SCHOOL:

HOST SCHOOL:

Signature

Signature

Title

Title

Date

Date