

Financial Aid Office 1510 Lake Road Dyersburg, TN 38024 Phone: (731) 286-3350 Fax: (731) 286-3354 financialaid@dscc.edu

Consortium Agreement

The following agreement provides the legal basis required by the federal government for Dyersburg State Community College (DSCC) to process federal financial aid for a student seeking a degree at DSCC who is enrolled at another eligible institution in coursework attributable toward their degree at DSCC.

Students wishing to enroll under this agreement shall contact the Financial Aid Office at DSCC to obtain the Consortium Agreement form. Students are responsible for securing and presenting this Consortium Agreement form to the host institution.

Section A – Student Information and Certification: To be completed by the student

Host Institution:						City/State:			
Host Fina	ncial Aid Administrato	r's (FAA) Name: _							
FAA Phone		FAA Email				FAA Fax			
Student Ir	nformation:								
						XXX-XX-	D00		
Student Last Name (Print)		First Name		M.I.		Social Security Number	DSCC ID Num	nber	
Street Address (Print)		City				State	Zi	p Code	
Phone Number		DSCC Email Address							
		Term:	Fall	Spring	Summer	Aid Year:			
Course worl	k to be completed at Host in	nstitution for term and	d aid yed	ar specified a	bove. You muc	h complete a separate form fo	or EACH semester.		
CRN	Course Number	Name of Course						Credit Hours	
Term Be	ginning Dates:				Term End	ding Dates:			

Section B – Student agrees to: (Initial each statement)

	I understand that this agreement is only for classes that are necessary for my program of study at DSCC, and only for the courses specified
	above.
	I have applied and enrolled as a "Transient/Non-Degree/Visitor" student at the Host Institution.
	I understand that it is my responsibility to ensure that an academic transcript from the Host Institution representing work attempted under
	this agreement is received by DSCC in a timely manner. Without a transfer transcript on file, aid for future terms will not be available.
	I understand that the transferred consortium credit hours will not reflect in my DSCC institutional GPA, but will be reflected in my: a) TELS
	GPA (HOPE recipients); b) overall DSCC GPA; c) calculation of Satisfactory Academic Progress (SAP) for financial aid at DSCC. Failure to
	maintain SAP will result in the loss of financial aid eligibility.
	I understand that I am responsible for the payment of any and all educational costs incurred at the Host School by the fee payment
	deadline.
	I understand that if I drop credit hours or withdraw completely from DSCC or the Host Institution during the term specified, I could be
	required to repay any financial aid disbursed through DSCC as a result of this agreement.
	I understand that should I make any changes to my schedule after signing the agreement, it is my responsibility to notify the Financial Aid
	Office immediately, as changes in enrollment could result in a change in the financial aid amounts.
	I understand that I will have to repay any overpayments to the DSCC Business Office resulting from a change of enrollment.
	I understand that financial aid disbursements will come from DSCC and will cover any DSCC tuition /fees first. Any remaining balance of aid
	will be issued to me in the form of a check or direct deposit by the Business Office.
I autho	rize the two institutions above to exchange information concerning my financial aid and academic record. I certify that my enrollment is a

ıs a regular student seeking a degree from DSCC, and that none of my transient hours are in correspondence classes.

Student Signature

Date

Student Name		DSCC ID					
Section C – Financ	cial Aid Agreements – Host Institution: To	b be completed by Host Institution's Financial Aid	Office.				
	hours enrolled at Host Institution for the transient (circle one): Yes No	consortium term: Semester Hours	Quarter Hours				
Date Classes Begir	ו:	Date Classes End:					
Last date to withd	raw without penalty						
Tuition and Fees	\$	Institutional/Private Aid \$					
Room and Board	\$	Tuition/Fee Discount \$					
Total	\$						
student du	uring the specified consortium term. FAA Printed Name	FAA Title	Date				
		i Ak file	Dute				
FAA Phone Number	FAA Fax Number	FAA Email Address					
Section D – Finand DSCC credit hours		u tion): <i>To be completed by DSCC's Financial Aid C</i> al credit hours)ffice.				
	Term Tuition and Fees (A)	DSCC CoA Components (B)					
	Host School's Tuition and Fees \$	Books/Supplies \$					
		Room and Board \$					
	Home School Tuition and Fees \$	Transportation \$					
	·	Personal \$					
		Other \$					
	Total (A) \$	Total (B) \$ Total COA \$					
		Three-quarter time Half-time Less than half-time					
	Consortium Term Award(s) and Amount:						

DSCC agrees to the following:

- 1. DSCC certifies that the student is enrolled in a degree program at DSCC and is maintaining Satisfactory Academic Progress. The credits earned at the Host Institution are transferrable to DSCC.
- 2. DSCC will award and disburse Title IV financial aid to the student for the term specified for the total number of credit hours combined at both institutions that applies to the student's degree program, in accordance with Title IV guidelines.
- 3. DSCC will maintain information on student's eligibility, including monitoring satisfactory academic progress; how award was calculated; what money has been disbursed, and other documentation associated with the award; perform federally required Return to Title IV Calculation: if student totally withdraws from all combined credit hours; respond as applicable to overpayment situations.