

# Financial Aid Consortium Agreement



Pine Technical College  
**FINANCIAL AID**

## Purpose and Instructions

**Purpose:** The purpose of a Financial Aid Consortium Agreement is to give students the ability to receive financial aid for program-related courses taken at more than one institution. Federal regulations allow only one institution to pay a student financial aid for the same semester. Courses taken at both institutions **must** be required for the student's program of study. The degree-granting (i.e. "Home") Institution processes and pays the financial aid to the student.

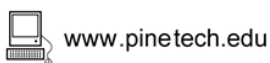
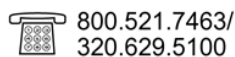
### Instructions:

- Complete the "Student Section."
- Meet with your academic advisor to determine if the course(s) is/are needed for your program of study and will be accepted in transfer.
- Have your academic advisor sign and date the "Degree or Certificate-Granting (Home) Institution Section."
- After registering for courses at the Host or Second Institution, contact the school about payment arrangements. **Note: Some Host Institutions require that you pay tuition and fees in full at the time of registration.**
- Return the completed agreement to the Financial Aid Office at Pine Technical College. Incomplete agreements will not be processed.

## Reminders

### Reminders:

- Notify the Financial Aid Office at Pine Technical College **BEFORE** making enrollment changes (adding courses, dropping courses, or withdrawing from courses).
- You are responsible for paying your bill at the Host Institution.



A MEMBER OF THE  
MINNESOTA STATE COLLEGES  
AND UNIVERSITIES SYSTEM

Follow instructions on Reverse Side

**Student Section**

Name: \_\_\_\_\_ Tech ID: \_\_\_\_\_  
Last First MI

Telephone: \_\_\_\_\_ PTC Program: \_\_\_\_\_ Term/Year: \_\_\_\_\_

**By signing, I understand the following:** I cannot receive financial aid at two schools during the same term. I need to obtain the approval of my academic adviser for the consortium course(s). Enrollment in extended term and/or correspondence courses may have an impact on my financial aid. The consortium course(s), if approved, will be included in measuring Satisfactory Academic Progress at my home institution. **I cannot change my enrollment without notifying the Financial Aid Office at my home institution.** I authorize the Host Institution to release my academic transcript to Pine Technical College. I am responsible for paying my bill at the host school.

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

**Host (Second) Institution Section**

Institution Name: \_\_\_\_\_

Course #	Course Title	# of Credits

**Degree or Certificate-Granting (Home) Institution Section**

Home Institution: **Pine Technical College, Financial Aid Office**  
**900 Fourth St SE, Pine City, MN 55063 PHONE: 320.629.5161 FAX: 320.629.5101**

**Academic Advisor / Registrar:** I recommend that the preceding course(s) be approved for the Financial Aid Consortium Agreement. Pine Technical College will accept these courses as part of the student's degree or certificate program here. I have determined that there are no courses being offered by this institution that could be substituted for this (these) course(s) this term.

Academic Advisor/Registrar Name: \_\_\_\_\_

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

**Financial Aid and Registrar's Office Use Only**

The F.A. Consortium Agreement is:  Approved  Not Approved

Credits at Host School: \_\_\_\_\_ Credits at Home School: \_\_\_\_\_ Total Credits: \_\_\_\_\_

Financial Aid Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Entered in ISRS: \_\_\_\_\_