



Financial Aid Office

Consortium Agreement Between Home Institution of Tusculum College
And

Name of Host Institution

An Agreement form is required for a student to receive Federal Financial Aid funds to attend an institution other than Tusculum College. Therefore, the institutions below have entered into an Agreement.

I. TO BE COMPLETED BY STUDENT

Student Name: _____ Social Security Number: _____

Mailing Address: _____ Phone Number: _____

I fully authorize the above institutions to release all information pertaining to my Financial Aid application. I certify that my enrollment includes only courses that will apply toward my degree from Tusculum College.

Student's Signature

II. TO BE COMPLETED BY STUDENT & SIGNED BY TUSCULUM COLLEGE REGISTRAR OR ASSISTANT REGISTRAR.

Please list course(s) (taken at the Host Institution) that are applicable to the student's program of study at Tusculum College. Six credit hours are required for the student to be evaluated for federal financial aid.

Course #	Course Title	Credit Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify the successfully completed courses indicated above will transfer to the student's program of study at Tusculum College.

Signature

Title

Date

III. TO BE COMPLETED BY FINANCIAL AID OFFICE AT HOST INSTITUTION.

_____ certifies that the above student has registered as a transient student for
(Institution)

(Term)

Cost of Attendance:

Tuition/Fees \$ _____

Books/Supplies: \$ _____

Room/Board: \$ _____

Miscellaneous/Travel \$ _____

Enrollment Data:

Dates of attendance _____ to _____

Total credit hours of enrollment _____

Total Cost of Attendance: \$ _____

Please provide appropriate signature on Page 2.

CERTIFICATION

Tusculum College agrees to award, process and disburse Title IV Federal Financial Aid, calculate and distribute refunds, and monitor student eligibility for the term(s) indicated on Page 1.

Tusculum College agrees to accept credit for courses successfully completed at the Host Institution for the term(s) indicated on Page 1.

The Host Institution agrees NOT to disburse any Title IV Federal Aid to the student referred to on Page 1 and to provide a transcript of the student's academic record at the end of the specified term(s). The Host Institution agrees to notify the Tusculum College Financial Aid Office if the student fails to begin a class, drops a class, or withdraws.

Signature Tusculum College (Financial Aid)

Date

Host Institution Signature (Financial Aid)

Date

Name of Host Institution

Telephone

Address

Return Completed Form to:

Office of Financial
P O Box 5049
Greeneville, TN 37743

Tusculum College

Fax to: 615-250-4968