

Union County College  
Office of Student Financial Aid

**AD HOC CONSORTIUM AGREEMENT**

**Student's Name:** \_\_\_\_\_

(Please Print)

**SS#/CWID:** \_\_\_\_\_

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

**It is the student's responsibility to complete, circulate and process this form between Union County College and the Visited Institution. Also, it is the student's duty to communicate (in writing) to the UCC Financial Aid Office of any changes affecting his/her enrollment and/or attendance at the visited institution.**

The student listed above is a degree-seeking student at Union County College. However, the student will be attending \_\_\_\_\_ as a visiting student during the \_\_\_\_\_ semester of the \_\_\_\_\_ academic year. **The student must attach a copy of her/his registration and payment to the visited institution for this document to be processed.**

The student wishes to use financial aid funds, which may include Pell grant, to help defray the cost of attendance during the visiting term. In order to facilitate the financial aid process for this student, Union County College will consider the student to be enrolled in an eligible program of study, and will award financial aid and be responsible for compliance with established policies including the responsibility for determining refunds and/or repayments resulting from the student's withdrawal from classes. The visited school, \_\_\_\_\_, agrees to provide Union County College with information on the cost of tuition and fees and to verify the student's enrollment (see above). The student's award will be calculated and disbursed by the home school.

The contents of this agreement are set forth to comply with the Federal Regulation concerning consortium agreements, and with the Federal Student Financial Aid Handbook concerning the same. The office of Financial Aid at Union County College has provided \_\_\_\_\_ with a statement that the student will receive full credit toward his/her degree at Union County College for all credits taken at the visited school. **The student must attach a copy of the UCC APPROVAL TO TAKE COURSES AT OTHER INSTITUTION (See the UCC Admissions Office – a meeting with a UCC Enrollment Specialist is required). This form will not be processed without this attachment.**

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**THE VISITED INSTITUTION MUST COMPLETE THE FOLLOWING:**

**ACTUAL ENROLLMENT (check one):**

Full-time \_\_\_\_\_ No. of Credits \_\_\_\_\_  
3/4-time \_\_\_\_\_ No. of Credits \_\_\_\_\_  
Half-time \_\_\_\_\_ No. of Credits \_\_\_\_\_

**COST OF ATTENDANCE**

**A) Budget at visited Institution:**

Tuition \_\_\_\_\_ Room & Board \_\_\_\_\_

Books \_\_\_\_\_ Misc. \_\_\_\_\_

**B) Pell Grant cost of attendance visited Institution:**

Tuition \_\_\_\_\_ Room & Board \_\_\_\_\_

**Financial Aid Administrators for both schools listed above, who are authorized to administer Federal Funds, must sign below.**

\_\_\_\_\_  
Signature/ Title of Financial Aid Administrator  
Union County College  
(SCREEN 306 TRACK CONS "C" - CONSORTIUM)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Title of Financial Aid Administrator  
Visited Institution

\_\_\_\_\_  
Date