Financial Aid Office



P.O. Box 1017 • Binghamton, New York 13902 Voice: (607) 778-5028 Fax: (607) 778-5451

Visiting Student Consortium Agreement

As per Part 668.19, Student Assistance General Provisions, and Part 690.8, Federal Pell Grant Program, Code of Federal Regulations, this Consortium Agreement is entered into between Broome Community College (the home institution) and the indicated Host Institution for the purpose of providing federal financial assistance to the student named below. This completed document must be on file with all concerned parties before BCC will disburse any financial aid funds for the period of enrollment in question.

Part 1: 10 Be Completed By Student	
Name:	Social Security Number:
Date of Visiting Enrollment: From/To	_// Academic year:
	BCC and the Host Institution for the enrollment period verified (Part III) by the burse all aid funds to the student for that particular enrollment period. It is tion any moneys due.
change form (contact the host school). If you are tak	nust apply for your TAP through that school. You may be required to file a TAP tring courses at both your home and host schools during the same semester, TAP t loan borrowers at BCC must complete a student loan entrance interview before
The student agrees that he/she will provide official g end of the period of enrollment.	grade transcripts from their Host Institution to the BCC Registrar's Office at the
Student's Signature	Date
Please list the course(s) the student is taking at the hos back to BCC (all courses passed with grades that are completed by Student's Department of the back to BCC.	st institution that are applicable to their degree program and approved for transfer
Department Chairperson's or Dean's Signature:	
Printed Name:	Telephone extension:
Academic Department:	
* Return to student after completion of Part II for forw	warding to the Host Institution.

Part III: To Be Completed By Host Institution Financial Aid Office Federal Pell Grant Cost of Attendance for academic year \$ Detailed Institutional Budget for Campus-Based financial aid for period of enrollment: Tuition and Fees \$ Full-time tuition (not including fees) \$ Room and Board* per credit hour tuition (not including fees) \$ Books and Supplies* Transportation* Other (specify)* Number of credit hours enrolled at Host Institution: ______ Length of Period of Enrollment: _____weeks Student is considered by the Host Institution to be enrolled: full-time half-time less than half-time Actual dates of enrollment for these credits: From ___/_ _ To / / Term(s) of Enrollment: ___ Summer ___ Fall ___ Spring ___ Other The Host Institution will certify the student's NY State TAP grant: Yes No * BCC expenses will be used unless a change of residence is required. Certification A. The Host Institution certifies that the above-referenced student is enrolled for the stated period of attendance. Further, the Host Institution agrees that it will inform BCC if the student withdraws before the end of the stated period of attendance as well as providing amended cost of attendance figures. B. The Host Institution agrees that it will not pay the student a Pell Grant and/or any campus-based funds and that it will not certify a Federal Direct Subsidized Loan, Federal Direct Unsubsidized Loan or Federal Direct PLUS loan for the stated period of enrollment. C. The Host Institution agrees the student will apply for all New York State grant/scholarship programs through the Host Institution if the student will be enrolled on a full-time basis at the Host Institution. Host Institution's Signature Date Name of Host Institution ______ Address _____ Telephone Number (____)____ FAX Number () Note: Please return this form to the BCC Financial Aid Office. A certified copy will be returned to you upon completion.

Part IV: To Be Completed By BCC Financial Aid Office

Student

Financial aid awards to be received by the student for	the stated period of enrollment are as follows:
Federal Pell Grant	\$
Federal Supplemental Educational Opportunity Grant	
Federal Perkins Loan	
Federal Stafford Loan	
Federal Unsubsidized Stafford Loan	
Federal PLUS Loan	
Other	
Student is considered by BCC to be enrolled full-t	time half-time less than half-time
	Certification
A. BCC agrees to accept the credits earned at the H this agreement has approved them.	Iost Institution if the Department Chairperson or Department Dean in Part II of
	suit and satisfactory academic progress, to be responsible for disbursing funds to Federal refund policy in cases of withdrawal from all course work.
C. BCC certifies that the student is enrolled in a comaintained by BCC during the period of this agree	degree granting program of study and that the student's matriculation will be ement.
BCC Signature	Date
Printed name	
Title	Broome Community College Financial Aid Office
Phone (607) 778-5028 FAX (607) 778-5451	P.O. Box 1017 Binghamton, NY 13902
Distribution: Host Institution BCC Financial Aid Office BCC Academic Department BCC Registrar BCC Bursar	