RIDGEWATER COLLEGE

Consortium Agreement
Hutchinson Campus
Ridgewater Financial Aid Office, 2 Century Ave SE, Hutchinson, MN 55350
Telephone 320-234-8600 or 1-800-722-1151   Fax 320-234-8506

Sections A and B (including all attachments) must be completed before this consortium agreement is sent to Ridgewater. The Consortium Agreement must be received by Ridgewater within 1 week of the start of the term. Agreements received after that date may not be processed. Incomplete and/or illegible forms will be returned.

SECTION A – Student's Section – please complete, attach required documentation, sign and date. Then give all forms to the Financial Aid Office at your HOST school (not Ridgewater) to complete Section B.

Student Name _____ Ridgewater ID_____ Host school ID_____

Address_____City_____State_____Zip_____

Phone_____Ridgewater e-mail_____

Term/Session & Year for which you are requesting funding from Ridgewater _____

Name and City of Host School _____
Note: If you are attending more than one 'host' school during the term listed above you must complete a separate consortium agreement for each host school.

I hereby request that for financial aid purposes, credits taken at Ridgewater and the host school listed above be used to determine my total enrollment status for the semester. **I understand that only credits applicable to my degree at Ridgewater will be approved for funding. I also understand that to receive financial aid I must:**
- Attach a copy of my course schedule from the host school
- Provide Ridgewater with grade transcripts from the host school for the above listed course(s) when they are completed
- Pay tuition and fees at the host school by their due date

Student's Signature_____ Date _____

SECTION B – Host School – Financial Aid Office   **Term/Session & Year** _____
This student is registered for the course(s) listed above and will NOT receive financial aid at our institution.

Institution Name _____   Tuiton & Fees _____
Signature _____   # of Credits _____
Position/Title _____   Date _____

SECTION C – Ridgewater Counseling Office
I have reviewed the course(s) listed above and determined that they will be accepted by Ridgewater as part of the student's degree objective.

Counselor Signature _____ Date _____

SECTION D- Ridgewater Financial Aid Office
This agreement is_____approved   _____not approved

Reason for not granting approval _____

Credits at Ridgewater _____ Credits at host school _____ Total credits for semester _____