

855 North Vermont Avenue Los Angeles, CA 90029 Phone: (323) 953-4000 Ext. 2010 Fax: (323) 953-4029 Email: finaid@lacitycollege.edu

### **CONSORTIUM AGREEMENT**

The **Financial Aid Consortium Agreement** is a contract between a student and the participating institutions. This agreement allows the student to receive financial aid at LACC for coursework taken at a secondary institution outside the Los Angeles Community College District.

#### **Process**

- Complete and initial the statements on Section 1 and print out a copy of your enrollment at the secondary college.
- Meet with your LACC Academic Counselor to evaluate your coursework at the secondary college.
- Submit the Consortium Agreement form (with Section 1 and 2 completed) to the Financial Aid Office at the secondary institution to complete Section 3 Secondary College Certification.
- Submit the completed Consortium Agreement form, along with the copy of your enrollment at the secondary college, to the LACC Financial Aid Office (in person or email it to <a href="mailto:finaid@lacitycollege.edu">finaid@lacitycollege.edu</a>)
- If your Consortium Agreement is approved, you must submit to the LACC Financial Aid Office proof of continued enrollment at the secondary college around the 60% mark of the semester (last week of October for Fall; third week of April for Spring).
- Once you complete the courses at the secondary college, you must submit unofficial transcripts to the LACC Financial Aid Office and your official transcripts to the LACC Admissions & Records Office.
- Financial aid for external courses will not be disbursed until the Consortium Agreement is completed, received, and approved by the financial aid office at LACC.

#### **Deadlines**

The LACC Financial Aid Office must receive a completed Consortium Agreement and proof of enrollment at the secondary college before the published deadline – visit <a href="https://www.lacc.edu/financial-aid/important-dates-deadlines">https://www.lacc.edu/financial-aid/important-dates-deadlines</a> for details.

Within 30 days after completing the courses, students must submit official transcripts from the secondary college to the LACC Admissions & Records Office and unofficial transcripts to the Financial Aid Office. Failure to do so may result in a Title IV Program overpayment

#### **Important Notes**

- Students are responsible for paying tuition and fees at the secondary college.
- Consortium Agreements are approved for one semester only and cannot be approved retroactively.
- Students may use any refunds received from LACC to pay secondary college tuition or reimburse themselves for payments already made.

For questions about this process or more information, please contact the LACC Financial Aid Office.



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# **CONSORTIUM AGREEMENT FORM**

Section 1: Studer	nt Information and Certification	on						
Student Name				CCD Student ID				
Academic Year	Term:	Fall	Spring	Summer				
Primary College	Los Angeles City College 855 North Vermont Ave Los Angeles, CA 90029 (323) 953-4000 ext. 2010 finaid@lacitycollege.edu	Seconda	P	hone				
Under this Consortium Agreement I certify that (please initial)								
I have submi	tted and completed a financial	aid applica	ition at LAC(	C.				
	in at least one course at LACC der Section 2.	that leads	to the degre	e, certificate, or transfer program				
I currently m	eet Satisfactory Academic Prog	gress (SAP)	standards a	t both LACC and the secondary college.				
	the LACC Financial Aid Office, urses approved within this Con	•		ny changes in the enrollment status of				
				ompletely from either LACC or the ncially responsible for repaying.				
I am respons	I am responsible to pay for any expenses (tuition, fees, books, etc.) incurred at the secondary institution.							
	of this form and at the 60% mar			ent at the secondary college upon (last week of October for Fall; third week				
	Within 30 days after completing the courses, I must submit <u>official transcripts</u> from the secondary college to the LACC Admissions & Records Office and <u>unofficial transcripts</u> to the LACC Financial Aid Office							
I must provid	I must provide any other documentation required by the institutions signing this agreement.							
I understand	_ I understand that other institutions are not obligated to participate in this agreement							
I understand agreement.	I understand that I cannot receive financial aid from the secondary college for the semester specified in the agreement.							
I understand term.	nderstand that the Consortium Agreement must be submitted prior to the specified deadline for the m.							
	I that financial aid for the approved external courses will not be disbursed until the Consortium s completed, received, and approved by the financial aid office at LACC							
	d that external courses are not considered for eligibility for Federal Work Study, Federal tal Educational Opportunity Grants, or Student Success Completion Grant at LACC.							
				ove will void this consortium agreement, ards and possible overpayments.				
	ve Student Certification and un consequences if I fail to meet t		ny rights and	responsibilities under this Consortium				
Student signature			Date	•				



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## **Section 2: LACC Academic Counselor Certification**

Secondary College Course Name/Number	Descriptive Title	Unit	LACC Course or	_			
	-						
Student's Major:	Edu	cational Goal:	AA/AS Degree	Certificate Transfe			
I certify that the courses list educational objective at Lo		e secondary coll	ege meet the require	ements for the student's			
LACC Academic Counselor	r's Signature Na	ıme (Please Print)		 Date			
Section 3: Secondary Co	llege Certification						
Will the student receive	financial aid at your inst	itution for the te	rm specified under	this agreement?			
	please indicate award typ		-	_			
Enrollment period under	this agreement:	to					
Cost of Attendance:							
Tuition/Fees*: \$	Personal Exp	enses: \$	Transportati	ion: \$			
Books/Supplies: \$	Room/Board:	: \$	Other:	\$			
*Please only include tuition a		ed under this agreer	nent.				
<ul> <li>student financial aid el</li> <li>Certifies that the stude</li> <li>Certifies that, for the teinstitution, other than t</li> <li>Agrees to notify LACC in agreement.</li> </ul>	sted has been accepted fo	or enrollment in a factory Academic ement, the studer trant. nd or withdraws fr	Progress standards at is not a financial ai	s. id recipient at your proved under this			
Financial Aid Officer's Si	gnature:		Date:				
Printed Name:		Title	»:				
Email:							
Section 4: To Be Comple	ted by the Primary Colle	ge					
	Comment	-					
Date Received:							
Decision: ☐ Approved  LACC FAO - Printed Nam			†a				
LACC FAO - Printed Name LACC FAO Signature & Date							