

# PERU STATE COLLEGE CONSORTIUM AGREEMENT

## SECTION A: TO BE COMPLETED BY STUDENT.

STUDENT NAME: \_\_\_\_\_

SSN or STUDENT ID: \_\_\_\_\_ HOME INSTITUTION: Peru State College

NAME OF HOST INSTITUTION: \_\_\_\_\_

MAILING ADDRESS OF HOST INSTITUTION: \_\_\_\_\_

\_\_\_\_\_

THE COURSES I WILL BE TAKING AT THE HOST INSTITUTION ARE AS FOLLOWS:

COURSE #	SEMESTER CREDIT HRS	COURSE NAME	BEG DATE	END DATE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I CERTIFY THAT I AM SEEKING A DEGREE FROM PERU STATE COLLEGE. I UNDERSTAND THAT I WILL RECEIVE MY FINANCIAL AID FROM PERU STATE COLLEGE BASED ON MY ENROLLMENT AT BOTH INSTITUTIONS. I REALIZE THAT I WILL BE RESPONSIBLE FOR MAKING PAYMENT TO THE HOST INSTITUTION. I ALSO UNDERSTAND THAT I MUST MAINTAIN SATISFACTORY ACADEMIC PROGRESS IN ACCORDANCE WITH PSC'S POLICY AND I AUTHORIZE PSC TO OBTAIN A FINAL GRADE REPORT FOR THE ABOVE LISTED COURSES FROM THE HOST INSTITUTION.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## SECTION B: TO BE SIGNED BY ACADEMIC DIVISION DEAN AT PSC AND REGISTRAR.

I CERTIFY THAT THE COURSES LISTED IN SECTION "A" WILL BE ACCEPTED AS TRANSFER CREDITS TOWARDS THIS STUDENT'S DEGREE AT PERU STATE COLLEGE, PROVIDED GRADES OF "C" OR BETTER ARE EARNED.

ACADEMIC DEAN'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

REGISTRAR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Return consortium agreement to student for completion of Section C.**

**SECTION C: TO BE COMPLETED BY HOST INSTITUTION'S FINANCIAL AID OFFICE.**

THE VISITING STUDENT LISTED IN SECTION "A" IS ENROLLED IN \_\_\_\_\_ SEMESTER/QUARTER CREDIT HOURS AT OUR INSTITUTION. (Circle one)

ENROLLMENT PERIOD: \_\_\_\_\_ TO \_\_\_\_\_

I CERTIFY THAT OUR INSTITUTION WILL NOT AWARD ANY FINANCIAL AID FOR THIS ENROLLMENT PERIOD AND WE WILL NOTIFY THE HOME INSTITUTION OF ANY CHANGES IN ENROLLMENT FOR THESE COURSES.

\_\_\_\_\_  
FINANCIAL AID OFFICE SIGNATURE                      TITLE    DATE

**Mail this form to: Peru State College, Financial Aid Office, P.O. Box 10, Peru, NE 68421**

**SECTION D: TO BE COMPLETED BY PSC'S FINANCIAL AID OFFICE.**

TERM ENROLLED: \_\_\_\_\_

CREDIT HOURS ENROLLED AT HOME INSTITUTION: \_\_\_\_\_

CREDIT HOURS ENROLLED AT HOST INSTITUTION: \_\_\_\_\_

TOTAL ENROLLMENT LEVEL: FT     $\frac{3}{4}$      $\frac{1}{2}$      $<\frac{1}{2}$

HOURS POSTED ON SCREEN 119 \_\_\_\_\_

\_\_\_\_\_  
FINANCIAL AID OFFICE SIGNATURE                      DATE