

TEXAS A&M UNIVERSITY-CORPUS CHRISTI  
Office of Student Financial Assistance  
Financial Aid Consortium Agreement  
Certification Form

In order to be eligible for a consortium agreement, a student must:

- Take courses at the HOST school that are transferable to their degree plan at TAMUCC.
- Be enrolled in a degree-seeking program at TAMUCC.
- Be making Satisfactory Academic Progress at TAMUCC.
- Not be receiving financial aid at the HOST school. Students are responsible for paying all tuition and fees at the HOST school. TAMUCC does not pay.
- Submit grade transcripts from the HOST school at the end of the semester. Failure to do so will cause an adjustment to your financial aid award.
- Withdrawing from courses at TAMUCC will cancel consortium agreement.
- A new consortium agreement must be completed for each semester.

Page 1 of this form is to be completed and signed the Registrar's Office and by your Academic Advisor at TAMUCC.

Page 2 of this form is to be completed and signed by the Financial Aid Office at the HOST school.

\* \*Texas A&M University-Corpus Christi currently has valid consortium agreements with Del Mar College, Coastal Bend College, and Texas A&M University-Kingsville. \*\*

**TEXAS A&M UNIVERSITY-CORPUS CHRISTI**  
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As allowed in Part 600, Institutional Eligibility Under the Higher Education Act of 1965, Part 668, Student Assistance General Provisions, and Part 690 Pell Grant Program, Code of Federal Regulations, this Financial Aid Consortium Agreement is entered into between Texas A&M University-Corpus Christi (hereinafter referred to as "Home Institution," and \_\_\_\_\_ (hereinafter referred to as the "Support (Host) Institution," located in \_\_\_\_\_, for the purpose of providing federal financial assistance to the student named below:

**Students must complete this form each semester for which they wish to receive financial aid under a consortium agreement before the 12<sup>th</sup> class day for Fall/Spring and 4<sup>th</sup> class day for Summer per Texas A&M University-Corpus Christi official census day.**

**CERTIFICATION HOME INSTITUTION**

Student's Name \_\_\_\_\_  
Last First M.I.

Student ID A \_\_\_\_\_

Course(s) \_\_\_\_\_  
 Approved Course name(s) and Number(s) at Host Institution (Indicate if Study Abroad Program)

Academic Term \_\_\_\_\_ Expected Dates of Enrollment: From \_\_\_\_\_ To \_\_\_\_\_

*The above named student has permission to study at the above campus for the period stated.*

The above class(es) apply to student's current degree program?  Yes  No

\_\_\_\_\_  
 Texas A&M University-Corpus Christi Academic Department Advisor's Name

Signature \_\_\_\_\_ Date \_\_\_\_\_

**REGISTRAR'S OFFICE**

Texas A&M University-Corpus Christi agrees to accept as transfer credit satisfactorily completed course(s) earned at the Support (Host) Institution and approved by the Texas A&M University-Corpus Christi academic advisor.

\_\_\_\_\_  
 Texas A&M University-Corpus Christi Registrar Signature Date

TO BE SIGNED BY STUDENT

By signing and dating below, the student agrees to:

1. Take courses at the Support (Host) Institution which are transferable to his/her degree program at the Home Institution.
2. Make satisfactory academic progress as specified by Texas A&M University-Corpus Christi Satisfactory Progress policy.
3. NOT receive financial aid at the Support (Host) Institution.
4. Enroll in at least 3 semester credit hours at Texas A&M University-Corpus Christi.
5. Authorize the Support (Host Institution) to send Texas A&M University-Corpus Christi copies of his/her transcript as needed to confirm satisfactory academic progress at the Support (Host) Institution.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**CERTIFICATION HOST INSTITUTION**

TO BE COMPLETED BY SUPPORT (HOST) INSTITUTION'S FINANCIAL AID OFFICER

Cost of Attendance Budget

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 Guaranteed Student Loan during the "Dates of Enrollment."

Tuition/Fees \$ \_\_\_\_\_

Room/Board \$ \_\_\_\_\_

Financial Aid Non-Payment Agreement

Books \$ \_\_\_\_\_

\_\_\_\_\_  
Host Financial Aid Officer Signature

Travel \$ \_\_\_\_\_

Dependent Care \$ \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

Misc. \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

TO BE COMPLETED BY SUPPORT (HOST) INSTITUTION'S REGISTRAR

Number of Enrolled Credits \_\_\_\_\_ This Constitutes FT \_\_\_\_\_  $\frac{3}{4}$  \_\_\_\_\_  $\frac{1}{2}$  \_\_\_\_\_  $\frac{1}{4}$  \_\_\_\_\_ Time

Length of Period of Enrollment \_\_\_\_\_ Weeks Dates of Enrollment: From \_\_\_\_\_ To \_\_\_\_\_

The Host Institution certifies that the student is enrolled for the "Dates of Enrollment." Further, the Support (Host) Institution agrees that it will inform the Home Institution **within two business days of a student's change in registration status.**

Enrollment Certification

\_\_\_\_\_  
Host Registrar

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date