RANDOLPH COMMUNITY COLLEGE | OFFICE OF FINANCIAL ASSISTANCE

2027-2028 Host Consortium Agreement

Student Name: _____ RCC Student ID or SSN: _____

Host Institution: _____ Term: _____

I hereby authorize the Host Institution listed above to release financial and academic information to Randolph Community College for the purposes of determining financial aid eligibility.

_____ _____

Student Signature Date

The student listed above is seeking a degree or certificate from Randolph Community College (RCC) and plans to enroll at the Host Institution listed above during the 2027-28 academic year. This Consortium Agreement will allow RCC to disburse financial aid based on the student's combined enrollment at both institutions. RCC is responsible for determining eligibility and awards, disbursing aid, monitoring academic progress, keeping records, returning funds, and federal reporting requirements. After all RCC charges are paid, RCC will disburse any excess aid to the student. **The student is responsible for paying any charges or using any refund(s) to pay the charges at the Host Institution.**

The Host Institution agrees to complete this form, to confirm enrollment, **to inform RCC if the student withdraws from these courses,** to send RCC an official transcript at the end of the semester, and to not give the student any Title IV grant aid during this enrollment period.

Host School Section:

Enrollment Period: From _____to_____ **Tuition & Fees**: **$**_____
(Month/date/year) (Month/date/year)

Books & Supplies: $_____ **Last day to drop these courses:**_____

Host School Aid for this term: $ _____

Name of Course (OR Attach Schedule)	**Course Number**	**Please Confirm the # of Enrolled Credits**
	Total Credits =	

Host Institution

Printed Name: _____

Title:_____

Authorized Signature:_____

Date: _____

Randolph Community College

Assigned Counselor:_____

Email: _____

Phone #:_____