

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

## FINANCIAL AID CONSORTIUM AGREEMENT FORM

Regulations stipulate that a student may only receive financial aid, other than the CA College Promise Grant (enrollment fee waiver), from one institution at a time. In some cases, a student who is unable to take required courses at Los Angeles City College (the *primary college*) may be able to take the courses at another college (the *secondary college*) and request that those units be counted toward their financial aid eligibility at the primary college.

The Financial Aid Consortium Agreement is the contract between the student, LACC, and the secondary college. The agreement permits LACC to process student aid based on the combined registered units at both institutions for the semester. For the units at the secondary college to be approved for financial aid purposes at LACC, the course must be able to be credited toward the student's degree, certificate, or transfer objective at LACC. Please note the units in a Consortium Agreement cannot be counted toward Federal Work Study or Federal Supplemental Educational Opportunity Grants, and while they may be considered for the Student Success Completion Grant (SSCG), awarding of the SSCG is dependent on the student meeting all eligibility criteria for the grant and on available funding.

Students participating in an approved Consortium Agreement are required to submit a copy of their official transcripts showing their final grade for the classes taken at the secondary college. The official transcripts must be sent to the LACC Admissions & Records Office within 30 days after the grades are posted. Failure to submit official transcripts within the provided timeframe will result in an overpayment of the aid disbursed under this agreement and impact eligibility in future semesters. <a href="Satisfactory Academic Progress">Satisfactory Academic Progress</a> (SAP) standards apply to courses taken under a Consortium Agreement and may affect the student's financial aid eligibility at LACC.

Reminder: It is the student's responsibility to pay the tuition and fees at the secondary college. If students are eligible for a refund from LACC, they may use the refund to pay the secondary college or to reimburse themselves for payments already made. Consortium Agreements are only approved for one semester at a time and are not approved retroactively. A completed Consortium Agreement, and proof of enrollment at the secondary college, must be submitted to the LACC Financial Aid Office 30 days before the end of the term to be evaluated for eligibility.

## **PROCESS:**

- Complete **Section 1: Student's Information & Certification** and print out a copy of your enrollment at the secondary college.
- Make an appointment with your LACC Academic Counselor to complete Section 2: LACC Academic Counselor Certification
- Submit the Consortium Agreement form (with Section 1 and 2 completed) to the Financial Aid Office at the secondary college for completion of *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. Please note that you will also need to submit proof of continued enrollment at the secondary college during the 60% mark of the semester.
- Your Consortium Agreement will be reviewed, and you will be notified of the status of your request via email to your student assigned LACCD email account.
- If your Consortium Agreement is approved, the LACC Financial Aid Office will award and disburse aid for the approved units at the secondary college.
- Upon completion of the course(s) at the secondary college, you will need to obtain and submit a copy of your
  unofficial transcripts showing the grades for your approved classes to the LACC Financial Aid Office, and you will
  need to send your official transcripts from the secondary college to the LACC Admissions & Records Office within
  30 days after the grades are posted.
- Please return this form in person to the LACC Financial Aid Office (Student Services Building, 1st Floor) or via email at <u>finaid@lacitycollege</u> (If submitting by email, you must send the form and documentation through your student assigned LACCD email account).



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LACC FINANCIAL AID CONSORTIUM AGREEMENT						
Student Name:	me: LACCD Student ID number:					
LACCD Email:	@student.laccd.edu	Phone Number:				
Primary College:		Secondary College:				
Los Angeles City College	Name					
855 North Vermont Ave	Address					
Los Angeles, CA 90029						
(323) 953-4000 ext. 2010	Phone Number					
Academic Year:	Semester:	Fall □ Winter □ Spring □ Summer				
This Consortium Agreement must b	e submitted 30 days befo	ore the end of the term to be evaluated for eligibility.				
Section 1: Student Certification						
Under this Consortium Agreement, t	he student:					
<ul> <li>Must be enrolled in a degree, ce</li> </ul>	ertificate, or other recogn	ized credential program at LACC.				
_	ication and have a compl	eted financial aid file prior to all applicable deadlines and				
_	=	oth LACC and the secondary college.				
		,				

- Must take courses at the secondary college which are transferable to their LACC educational goal as certified by their LACC academic counselor.
- Must notify the LACC Financial Aid Office, in writing, if they do not begin attendance in the courses listed and approved in this Consortium Agreement.
- Must immediately inform LACC and the secondary college, in writing, of any change in enrollment status, including withdrawing from all courses or substitution of approved courses.
- Must complete all courses enrolled in during the specified term. Failure to complete courses and/or withdrawing completely from either LACC or the secondary college may result in an overpayment that the student will be financially responsible for repaying.
- Is responsible to pay for any expenses (i.e., tuition, fees, books) charged by the secondary college according to their payment schedule.
- Must provide verification of enrollment to the LACC Financial Aid Office upon submission of the Consortium Agreement form and at the 60% mark of the specified term.
- Must provide LACC with a copy of transcripts/grades from the secondary school within 30 days after completing the term specified. Failure to submit official transcripts within the provided timeframe will result in an overpayment of the aid disbursed under this agreement and impact eligibility in future semesters.
- Must provide any other required documentation to either or both LACC and the secondary college.
- Understands that the secondary college will not provide financial aid to the student for the semester specified in the agreement.
- Understands the Consortium Agreement for the specified term must be submitted 30 days prior to the last day of
- Understands that Consortium Agreements will not be approved retroactively.
- Understands financial aid for the specified term will not be processed until after all required documentation is submitted.

I have read the above Student Certification and understand my rights and responsibilities under this Consortium Agreement and the consequences if I fail to meet them.

Student signature:	Date:	



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

Please, list the courses taken at the Secondary College for the term specified above:

Secondary College Course Name/Number	Descriptive Title		LACC course or GE ARE equivalent/Counselor's Con	nments
Student's Major at LACC:	Ected above taken at the seco	lucational Goal:	☐ AA/AS Degree ☐ Certificate e applicable to the student's educat	☐ Transfer
LACC Academic Counselor's S	Signature Na	ame (Please Print	) Date	
Section 3: Secondary Co	ollege Certification			
Enrollment period under this	agreement: Term start o	late:	Term end date:	
Enrollment status: ☐ Full tin	ne □ Three-quarter time □	☐ Half time ☐ Les	s than half time Number of Units	
Will the student receive finar	ncial aid at your institution	for the term spec	cified above? 🗆 Yes 🗆 No	
If "Yes", please indicate the a	award type and amount:			
Cost of Attendance:				
Tuition/Fees*: \$	Personal Exp Room/Board	enses: \$	Transportation: \$	
Books/Supplies: \$	Room/Board	: \$ <u> </u>		
*Please only include tuition an	d fees for courses approved u	nder this agreemen	t.	
<ul> <li>student financial aid elig</li> <li>Certifies that the studen</li> <li>Certifies that they will not term specified in this agr</li> <li>Agrees to notify LACC if</li> </ul>	ed has been accepted for e ibility requirements. t listed is meeting Satisfact process financial aid, oth reement.	nrollment in an a cory Academic Pro ner than the CA Co or withdraws from	cademic program that meets the Titogress standards. College Promise Grant, for the studer on the courses approved under this a	t for the
Secondary College Financial A	Aid Officer Signature	Name (Please Pri	nt) — Date	
Title	Email		Phone Number	
For LACC Financial Aid Office	e Use Only:			
Date Received	Decision:	☐ Approved ☐ [	Denied	
Comments:				
LACC Financial Aid Officer Signat	ture	Name	Date	