



Mt Hood Community College
 Financial Aid Office
 26000 SE Stark St
 Gresham, OR 97030
 503-491-7262
 503-491-7379 FAX

Financial Aid Consortium Agreement

Mt. Hood Community College and _____ (Host Institution)

Student Name: _____ Hours Registered at MHCC: _____
 Social Security Number: _____ Hours Registered at Host: _____
 Term of Attendance: _____ Year: _____ Phone Number: _____

Please read the general provisions carefully:

1. Students **must** have the Financial Aid Office at your host school sign this form first.
2. Completed form must be received by MHCC Financial Aid Office **before 5pm on the first Friday of the term.**
3. Have the host school send or fax the signed form **and** a copy of your registration at your host school to MHCC Financial Aid Office. **Fax: 503-491-7379**
4. Students **must** be taking at least 6 credits at MHCC for MHCC to be considered the home school.
5. Courses that are taken at the host institution **must** apply toward your degree or certificate at MHCC.
6. Courses that are upper division (300 or higher level) at the host school will not be funded by MHCC.
7. MHCC will not process agreements with semester or clock-hour schools.
8. Students can only receive financial aid for a term at one school.
9. It is the student's responsibility to pay the host school.
10. It is the student's responsibility to submit a grade report to the MHCC Financial Aid Office at the end of the term.
11. **It is the student's responsibility to have an official transcript from the host school sent to MHCC at the end of the term so the credits can be transferred toward your MHCC degree or certificate. Future funding may be postponed until this has been completed.**

I authorize Mt. Hood Community College and the host institution to share information about me regarding Financial Aid, grades, admissions, and related academic issues. This sharing of my information may take place electronically via the Oregon Financial Aid Exchange (OFAX). I understand this agreement and agree to the conditions listed above.

_____ _____

Student Signature **Date**

Financial aid will be administered by Mt. Hood Community College. Hours from the host institution will be considered in the enrollment calculation at the home institution for financial aid purposes. All financial aid will be applied to tuition and fees at the home institution first, and any remaining aid will be sent to the student who is responsible for paying all tuition, fees, and other costs at the host institution. The policies of the home institution will be in place in cases of refund/repayment due to withdrawal from courses.

_____ _____

Financial Aid Office – MHCC Date

_____ _____

Financial Aid Office – Host Institution Date