



Financial Aid Consortium Agreement

Excelsior College – Parent Institution

This Federal financial aid consortium agreement enables enrolled Excelsior College degree-seeking students to participate in financial aid programs while concurrently attending Excelsior College (Parent College) and another accredited higher education institution (Non-Parent Institution). This agreement does not guarantee an increase in the amount of financial aid you will be eligible to receive. Excelsior College reserves the right to decline a student’s request for a consortium agreement if, in the opinion of the Excelsior College Financial Aid Office (FAO), that consortium agreement would be administratively prohibitive. This agreement does not guarantee deferment of your past loans, please contact your lender.

TO BE COMPLETED BY THE STUDENT

Student Last Name	Student First Name	Middle Initial	Student ID #
Street Address or PO Box		Apt. or Suite Number	Email Address
City	State	Zip Code	Daytime Phone
Academic Year	Major/Program	Beginning of Attendance	Ending Date of Attendance

Submission Deadlines
 Fall: August 15 for the Fall trimester term
 Spring: December 15 for the Spring trimester
 Summer: April 15 for the Summer trimester

- Eligible Non-Parent School Agreements (please check one)**
- Broome Community College
 - American River College
 - Daemen College
 - Howard Community College
 - Anne Arundel Community College
 - Hudson Valley Community College
 - Salem Community College
 - University of Cincinnati
 - Utah State University
 - Memorial College of Nursing
 - Samaritan Hospital School of Nursing
 - Dutchess Community College
 - SUNY Adirondack
 - Westchester Community College
 - Columbia Greene Community College

TERMS OF AGREEMENT (Please initial each line indicating that you have read and understand these terms.)

_____ **I must pay my non-parent institution.** Excelsior College will not provide early release of financial aid or send payment to your non-parent institution.

_____ **I will receive limited consideration for financial aid.** For Federal aid consideration, you must have a combined minimum enrollment of 6 credit hours. A minimum of 1 course (3 credits) must be taken at Excelsior College for the term listed.

_____ **I can only receive financial aid for the non-parent institution courses that are applicable to my Excelsior College certificate or degree program.**

_____ **I can receive financial aid only from Excelsior College (not from my non-parent college) for the term listed.** All financial aid records for this period will be maintained at Excelsior College.

_____ **I must maintain Satisfactory Academic Progress (SAP) as outlined in Excelsior College's Student Handbook.**

REQUIRED ACTIONS

- **Attach a copy of your course registration/schedule from your non-parent institution** to this completed form.
- **Return this form to the Excelsior College Financial Aid Office by the noted deadline.**
- **Enroll in at least one Excelsior College course (minimum of three credits) for the term listed.**
- **Notify the Excelsior College financial aid office immediately if you drop or withdraw from any course.**
- **Obtain course approval for the courses you are taking at the non-parent institution.** All credit hours must be applicable and counted toward your Excelsior College degree. Course approval can be obtained by calling or emailing your advisement team, or through MyExcelsior. *Your course approval is recorded in our student information system, and verified by the financial aid office upon submittal of this form.* These credit hours must transfer and be counted toward your Excelsior College degree.
- **Submit official grade transcripts from your non-parent institution to the Excelsior College Registrar's Office** at the end of the **term** for which this consortium agreement was granted. Failure to submit final grades in a timely manner will result in a hold on future financial aid disbursements.

COURSE INFORMATION (Do not leave answers blank.)

1) What is your planned enrollment in regular credit hour courses for the term in question? Attach additional pages if necessary.

Institution	Course Prefix	Course Title	Credits Hours
At Excelsior College Parent Institution	_____	_____	_____
	_____	_____	_____
At Non-Parent Institution	_____	_____	_____
	_____	_____	_____

STUDENT CERTIFICATION STATEMENT

I certify that the submitted information is true and correct to the best of my knowledge and belief. I understand and agree to adhere to the terms and perform the required actions outlined above. I understand that purposely providing false or misleading information or failure to abide by the terms noted above may result in imprisonment, fines and/or reduction or repayment of financial aid, in this and/or subsequent term. I also agree to allow my non-parent institution to release requested student information that relates to my Financial Aid to Excelsior College’s financial Aid office staff.

Student Signature

Date

THIS SECTION TO BE COMPLETED BY NON-PARENT INSTITUTION FINANCIAL AID OFFICE ONLY

NON-PARENT INSTITUTION CERTIFICATION STATEMENT

The student named on this form is registered for _____ credit hours at _(Institution Name) for the ___(Dates) of the Period of Enrollment. As the non-parent institution, we will not process this student for financial assistance, all records will be kept at Excelsior College (parent institution), and we agree to share relevant information about this student’s enrollment as requested by Excelsior College’s Financial Aid office.

Non-Parent Institution Financial Aid Office Staff Signature Date

College/University

Print Name

Office Phone

Office Fax

College Address

SUBMISSION DEADLINES

Fall: August 15 for the Fall trimester term **Spring:** December 15 for the Spring trimester term **Summer:** April 15 for the Summer trimester term

Deadlines dates are firm. The student will be notified by e-mail if the documents were received after the specified deadline.

MAIL, EMAIL, OR FAX COMPLETED FORM TO:

Financial Aid Office

Excelsior College

7 Columbia Circle Albany, NY 12203-5159

vafa@excelsior.edu

Fax: (518) 464-8660

Excelsior College Financial Aid OFFICE USE ONLY

- Confirmed registration in ____ Excelsior College credit hours.
- Confirmed paid receipts for non-parent institution in __ non-parent institution credit hours.
- Confirmed course approval for non-parent institution coursework listed.

Counselor Signature

Date