



Enrollment Services
125 Michigan Avenue NE
Washington DC 20017
202.884.9530 fax: 202.884.9524

FINANCIAL AID CONSORTIUM AGREEMENT PROCEDURES

To receive financial aid while taking classes at another school, students must complete the Financial Aid Consortium Agreement process. Students may not receive financial aid at two schools for one academic period, so as a Trinity student it is important to have your financial aid through Trinity. Not to be confused with the DC Consortium of Universities, Financial Aid Consortium Agreements are needed whenever a Trinity student wants financial aid for classes off campus.

Trinity, your home school, will process your financial aid based on the coursework you are also taking as a visiting student at another college. It is your responsibility to submit all the required information in order to have your financial aid request processed. The following procedures will help you in completing your Consortium Agreement paperwork.

Please note Trinity aid, DC Tuition Assistance Grants, and DC LEAP Grants will not be awarded based on classes taken off campus through a financial aid consortium agreement. Students may receive aid from federal and private programs only.

1. Provide a copy of the **Request to Take Off Campus Courses Form** to the Office of Enrollment Services. This is written approval to take the coursework at another college indicating it will be accepted back at Trinity for transfer credit toward your degree requirements. Coursework that is not part of your current Trinity degree requirements may not be included.
2. Submit a **Financial Aid Consortium Agreement Form** to the financial aid office at the host school you are visiting. The host school financial aid office must complete the form and return it to Trinity. This form lets us know the expenses involved with attending the other school and allows us to determine your aid eligibility. A blank form is attached.
3. Submit the Free Application for Federal Student Aid (FAFSA) and any additional documentation requested by the Office of Enrollment Services at Trinity.
4. Students who withdraw from classes may lose financial aid eligibility. It is the student's responsibility to check with Trinity's Office of Enrollment Services to find out if there will be an impact on eligibility if they withdraw from any courses.
5. A Consortium Agreement may be processed for only one semester; therefore, students who need an additional agreement processed will be responsible for completing a new agreement each semester.
6. All financial aid proceeds will be paid to Trinity, and any proceeds in excess of your Trinity bill will be sent as a refund to the student or sent to the other school. You are responsible to make payment arrangements with the other school. If you need Trinity to send funds to the other school, you must notify us in writing of the amount to send and the school's mailing address.

To expedite the processing of your financial aid, you should complete the above procedures and submit the information to the Office of Enrollment Services as early as possible. Delays could affect your eligibility for aid.

Questions?? Contact:
Office of Enrollment Services
125 Michigan Ave NE
Washington, DC 20017
(202) 884-9530
enrollmentservices@trinitydc.edu

**TRINITY'S OFFICE OF ENROLLMENT SERVICES
FINANCIAL AID CONSORTIUM AGREEMENT**

The Financial Aid Office of _____ (Host School) and Trinity's Office of Enrollment Services will enter into a consortium agreement for:

Student: _____ SSN: _____

Semester: _____ 20____ Program: _____

HOST SCHOOL CERTIFICATION

- The host school certifies that the student has been accepted for enrollment and that the program meets federal financial aid requirements.
- The host school agrees to notify Trinity if the student fails to enroll or withdraws from the program.
- The host school agrees not to provide payment to the student under the federal financial aid programs.

Enrollment Period:
From: _____ To: _____

Enrollment Status:
Full Time: _____
Three-quarters Time: _____
Half Time: _____
Less than Half Time: _____

Student Expenses:
Tuition & Fees: _____
Room & Board: _____
Books & Supplies: _____
Travel: _____
Personal: _____
Total: _____

Institutional Award: _____

Disbursements in excess of current Trinity tuition will be directed to the student's home address on record unless otherwise requested by the student in writing.

Host School Signature: _____ Date: _____

Printed Name and Title: _____ Telephone: _____

TRINITY CERTIFICATION

- Trinity agrees to provide payment to the student, if eligible, under the Pell Grant, Stafford Loan, and/or PLUS Loan programs as appropriate.
- The student is enrolled in a degree-seeking program and is maintaining satisfactory academic progress.
- The credits earned at the host school are transferable to Trinity.

Signature: _____ Date: _____

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Request to Take Course(s) at Another Institution

Please print clearly. This form is to be submitted before taking course(s) at another institution and serves to clarify for the student what transfer credit he or she may expect upon successful completion of the course indicated. If interested in taking a course through the Consortium cross-registration program, please obtain the Consortium Registration Request form. The student must provide a course description to his/her advisor before seeking approval. For CAS students, if this course is to be used for FLC requirements, or toward major or minor requirements, approval of the relevant department chairperson is also required. Upon completion of the course, the student is responsible for submitting an official transcript to the Enrollment Services Office for final evaluation of the transfer credit.

Please return the completed form (with all signatures) and the course descriptions to the Enrollment Services Office.

Student Name: (F) _____ (L) _____ PC ID# or SSN: _____

School: CAS SPS EDU Name of Advisor: _____

Institution where course(s) will be taken: _____ Semester: _____ Year: _____

| Courses to be taken at other institution | | | Trinity Equivalent* (to be completed by advisor) | | | Check Here if No Equivalent** |
|---|---------|--------------|---|---------|--------------|----------------------------------|
| Course ID | Credits | Course Title | Course ID | Credits | Course Title | |
| | | | | | | |
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*Advisor/Dept. Chair: Please indicate above your recommendation for how this course will transfer to the student's Trinity degree program. The Office of Enrollment Services will determine final transfer credit after an official transcript is received.

**No direct Trinity equivalent. Any transfer credits awarded for this course will be elective credit. Note: electives may be used to satisfy major/ degree requirements with proper approval.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Dept. Chair Signature (CAS students only): _____ Date: _____

Office Use Only: Date Received: _____ Entered by: _____ Date: _____