

Section III – To be completed by HOST School

Will the student receive financial aid at your institution? Yes No

If “Yes”, STOP. Do not complete the remainder of this form. Please sign the form and return it to the student. If “No”, please complete the remainder of this form.

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|---|--|
| Dates of Enrollment under this Agreement: | Number of Weeks of Instructional Time: |
| 1. Tuition and Fees (per credit hour): | \$ |
| 2. Books and Supplies (per credit hour) | \$ |
| 3. Room and Board | \$ |
| 4. Transportation | \$ |
| 5. Miscellaneous | \$ |
| TOTAL | \$ |

Under this Consortium Agreement and upon completion of this form, the HOST institution will:

- Certify that the student is enrolled in an academic program that meets Title IV requirements
- Provide institution-specific consumer information to the student
- Notify EGCC if the student drops or withdraws from any or all courses at the HOST institution
- NOT process any federal or state financial aid from the consortium term
- Attach a copy of the student’s current registration and invoice to this form

EGCC’s Financial Aid Office will be notified by the Host Institution if the student drops or withdraws from any classes taken under this agreement. Yes No

Host School’s Financial Aid Officer’s Signature

Print or type name

Telephone Number/E-Mail Address

Date

Please return this form to:
Eastern Gateway Community College
Office of Financial Aid
4000 Sunset Blvd.
Steubenville, OH 43952

Phone: 740 264-5591
Fax: 740 266-2991
www.egcc.edu