

Inver Hills Community College  
 Officer of Financial Aid  
 2500 East 80<sup>th</sup> Street  
 Inver Grove Heights, MN 55076  
 651-450-3518

METRO ALLIANCE  
 FINANCIAL AID  
 CONSORTIUM AGREEMENT

**STUDENT SECTION**

Name \_\_\_\_\_ SSN \_\_\_\_\_ Student ID \_\_\_\_\_  
 Last First MI

Address \_\_\_\_\_  
 Street City State ZIP

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_ Term/Year \_\_\_\_\_

I understand: I cannot receive financial aid at two schools during the same term. I need to obtain the approval of my registrar/academic advisor for the consortium course(s). Enrollment in extended term and /or correspondence courses may have an impact on my financial aid. I will attach a copy of my registration at the host (second) institution to this form and, if required by my home (degree or certificate-granting) institution, I will attach a paid fee statement. The consortium course(s), if approved, will be included in measuring Satisfactory Academic Progress (SAP) at my home institution. I cannot change my enrollment without notifying the Financial Aid Office at my home institution. I will provide an academic transcript from the host institution to my home institution once the term covered by the financial aid consortium agreement has concluded.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**HOST (SECOND) INSTITUTION SECTION**

Institution Name \_\_\_\_\_

Course #	Course Title	# of Credits	Term Type*	Term Dates	Instruction Mode*	Grading Option*	Tuition & Fees Paid: Y/N

\*Term type: Semester, quarter, extended term, other. Note: Federal financial aid regulations subject courses that deviate substantially from the institutions' standard term to more stringent treatment (e.g., semester system offer an extended term course that allows more than six months for completion).

\*Instruction mode: On-campus, telecommunications, correspondence, other. On-campus includes face-to-face, lecture/lab, etc. Please see definitions of "telecommunications" and "correspondence" on the MnVU website: <http://www.mnvu.org>. Click on Learner Services and then on Financial Aid. Note: Federal financial aid regulations subject correspondence courses to more stringent treatment than on-campus or telecommunications courses.

\*Grading options: A-F, S-N (satisfactory-Unsatisfactory), audit, other.

The student has registered for the courses above. The student will **not** receive financial aid at this institution.

Financial Aid Administrator \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**INVER HILLS COMMUNITY COLLEGE SECTION**

I recommend that the preceding course(s) be approved for the Financial Aid Consortium Agreement. This institution will accept these courses for the student's degree or certificate program. I have determined that there are no courses being offered by this institution that could be submitted for this (these) course(s) this term.

Academic Advisor \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Financial Aid Office Use Only**

This Financial Aid Consortium Agreement is: \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved  
 Credits at host School \_\_\_\_\_ Credits at IHCC \_\_\_\_\_ Total Credits \_\_\_\_\_

Financial Aid Signature \_\_\_\_\_ Date \_\_\_\_\_