

PO Box 1000 Park Hills, MO 63601



One University Plaza Cape Girardeau, MO 63701



## **/CONSORTIUM AGREEMENT FOR ADMINISTRATION OF FINANCIAL AID**

The agreement, when fully complete, will allow the Home Institution to process your financial aid based on the combined enrollment of the Home and Host Institution for the specified semester. The institution that processes and pays the student financial aid is the Home Institution. The institution that does not process or pay the student financial aid is the Host Institution. The Home Institution is typically the institution who you will be receiving your degree from.

You must be a degree or certificate-seeking student with the Home Institution to complete this agreement. Any courses must transfer towards your degree. If you are in "0" hours at the Home institution, you must obtain permission from the Home institution prior to completing a consortium agreement. If you will be enrolled in 12 hours or more at your home institution, contact your home school prior to completing this agreement. *Do not submit your consortium agreement until you are enrolled at both the Host and Home Institution*.

## STUDENTS RIGHTS AND RESPONSIBILITES

- Complete a FAFSA.
- Agreement must be completed each semester.
- You are responsible for your bill at both the home and host institution. DO NOT ignore any bills you receive from either the Host or Home institution.
- Notify both institutions of dropped classes within 2 weeks.
- A transcript must be sent at the end of the semester.
- Pay attention to the processing deadlines.
- Students in a consortium agreement need to return the agreement to the host institution.
- All federal aid recipients must maintain satisfactory academic progress for financial aid in accordance with the policy of the Home Institution.
- The Home institution may verify enrollment with the Host institution during the semester. Your financial aid may not be released until your enrollment is confirmed. This could delay the processing of refund checks.
- Do not ignore any correspondence from your lender. Contact them immediately upon receipt of any discrepant information concerning enrollment verification.

Consortium agreements are only recognized for the purposes of federal aid. State or Institutional aid may require full-time enrollment at your Home Institution in order to receive the funds.

\*\* To avoid a delay in receiving your Financial Aid, please submit the consortium agreement by no later than Friday of the first week of class \*\*



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2080 Three Rivers Blvd Poplar Bluff, MO 63901

## **/PARTICIPATING SCHOOLS**

SOUTHEAST MISSOURI STATE UNIVERSITY							
School Address: Southeast Missouri State University, One University Plaza MS 3740, Cape Girardeau, MO 63701							
Contact Name: Student Financial Services	Phone: 573.651.2253 Fax: 573.651.5006						
MINERAL AREA COLLEGE							
School Address: Mineral Area College, P.O. Box 1000, Park Hills, MO 63601							
Contact Name: Julie Crabdree	Phone: 573.518.2249	Email: finaid@mineralarea.edu					
Contact Name: Business Office	Phone: 573.518.2115	Email: macbusofc@mineralarea.edu					
THREE RIVERS COLLEGE							
School Address: Three Rivers College, 2080 Three Rivers Blvd, Poplar Bluff, MO 63901							
Contact Name: Regina Morris	Phone: 573.840.9606	Fax: 573.840.9604					
MISSOURI SOUTHERN							
School Address: Missouri Southern, 3950 E. Newman Road, Joplin, MO 64801-1595							
Contact Name: Becca Diskin	Phone: 417.625.9584	Fax: 417.659.4474					
JEFFERSON COLLEGE							
School Address: Jefferson College, 1000 Viking Drive, Hillsboro, MO 63050							
Contact Name: Paula Carpenter	Phone: 636.481.3218						

## **/CONSORTIUM AGREEMENT FOR ADMINISTRATION OF FINANCIAL AID**

STUDENT INFORMATION						
Enrollment Period:	FALL	SPRING	SUMMER			
Student Name:			Phone Number:			
SSN:			Aid Year:			
HOME INSTITUTION (Grants your degree or certificate and processes your Financial Aid)						
Student ID #:		Email Address:		Hours En	rolled:	
Southeast Missouri State University, One University Plaza, Cape Girardeau, MO 63701 Other:						
Mineral Area Community College, PO Box 1000, Park Hills, MO 63601						
Three Rivers College, 2080 Three Rivers Blvd., Poplar Bluff, MO 63901						
HOST INSTITUTION (Institution that will NOT process your Financial Aid)						
Student ID #:		Email Address:				
Southeast Missouri State University, One University Plaza, Cape Girardeau, MO 63701 Other:						
Mineral Area Comm	unity College, PO Box 10	00, Park Hills, MO 6360	1			
Three Rivers College	e, 2080 Three Rivers Blvd.	, Poplar Bluff, MO 6390	1			
Cape College Center	, 1080 Silver Springs Roa	d, Cape Girardeau, MO	63703			
Jefferson Communit	y College, 1000 Viking Dr	ive, Hillsboro, MO 6305	0			
SCHEDULE AT HOST	<b>FINSTITUTION</b>					
Course/Section#	Course	Title	Course Dates	Sem. Hours	Total Tuition	
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I agree: 1) That I have read the consortium agreement and agree to all policies and requirements for the indicated period of enrollment at both the Host Institution and the Home Institution; 2) I understand that I am responsible for requesting a transcript. A FINANCIAL AID HOLD WILL BE PLACED ON MY ACCOUNT FOR SUBSEQUENT SEMESTERS UNTIL THE TRANSCRIPT IS RECEIVED BY THE HOME INSTITUTION; 3) If there are any associated charges with this transcript request, I understand that I am responsible for those charges.						
SIGNATURES						
Student Signature Date						
Host institution – I certify that the student named above is currently enrolled in the listed courses at the Host Institution. I agree to contact the Home Institution if there is any change in enrollment during the course of the indicated period of enrollment within 2 weeks.						
Host Institu	tion Registrar Signature/I	Date	Host	Institution Financial Aid Dir	ector Signature/Date	
Home Institution Registrar Signature/Date		Hom	Home Institution Financial Aid Director Signature/Date			
For Office Use Only: Home: Inst: Other Host: Inst: Other						
One University Plaza MS 3740 🖌 Cape Girardeau, MO 63701						

sfs@semo.edu / T 573.651.2253 / F 573.651.5006