2024-2025

University of Rio Grande Office of Financial Aid



Consortium Agreement

Please fill in the spaces below:

What is a consortium agreement?

A consortium agreement is a binding agreement between eligible schools which enable you to receive various types of aid from the University of Rio Grande/Rio Grande Community College while being enrolled as a visiting student at another school. The University of Rio Grande/Rio Grande Community College is considered your **home school** and the visiting school is referred to as the **host school**. There are four (4) sections to the agreement, all of which need to be completed in full before the agreement can be processed by the Financial Aid office. Please use this checklist to help determine your eligibility.

Student Checklist:

- Complete section I of the Agreement.
- Meet with your Academic Advisor at the University of Rio Grande to have Section II completed.
- Visit your Financial Aid advisor to have Section III of the agreement reviewed and signed. Sections I
 and II should already be completed.
- Have the host (not Rio's) school's Financial Aid Office complete Section IV. The host school faxes the completed form to the University of Rio Grande Financial Aid office for processing. It's important to check with the host school for processing time requirements for section IV completion.
- Check with your host school to determine when its enrollment fees must be paid. Even if payment is due prior to financial aid being disbursed at the University of Rio Grande, you are obligated to pay your host school in a timely manner. Be aware that aid will be disbursed based on the University of Rio Grande's disbursement schedule.
- After completing the consortium term, you must request an academic transcript from the host school to be sent to Ohio State Registrar's Office. Failure to do so may affect your financial aid eligibility.

Financial Aid Eligibility:

Your aid eligibility during the consortium term is determined by your enrollment (credit hours at the host school and credit hours taken at the University of Rio Grande).

Possible aid available to students based on credit hours taken at the host institution:

- Federal Pell Grant
- Federal Supplemental Educational Opportunity Grant (SEOG)
- Federal Direct Loan (Subsidized, Unsubsidized and PLUS)
- Federal Work-Study (must be at least half-time at OSU)
- Ohio College Opportunity Grant
- Private Loans (may require lender approval)

University of Rio Grande/Rio Grande Community College

PO Box 500 Rio Grande, OH 45674-0500

Financial Aid Office Phone:**740-245-7218** Fax: **740-245-7102**

Email: finaid@rio.edu



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Consortium Agreement

Please fill in the spaces below:

SECTION I: To be completed by the student.

Name:		Social Security Nu	ımber:	
Home Address:		RIO Student ID	Number:	
City:	State:	ZIP Code:		
Home Phone:		Campus/Ce	ll Phone:	
Email Address:				
Consortium Term: Summer		Autumn	_Spring-	Year:
Please Note: With few exceptions a cor	nsortium ag	reement specifica	ally applies to	one term of enroll-
ment.				

 Do you plan to register at the University of Rio Grande during the consortium term? (Please circle one)

 Yes
 No

 If "Yes":
 How many hours do you plan to take at Rio?

Statement of Authorization:

I agree to:

- Have the host school send the completed form to the University of Rio Grande by the first Friday of the consortium term (first Friday of classes at the University of Rio Grande)
- Complete the hours indicated in Section III of this agreement at the host institution and the hours listed about at the University of Rio Grande
- Comply with the University of Rio Grande's and the host school's policies regarding refunds, Satisfactory Academic Progress, and all other eligibility requirements. **** Please note: Students must pay all tuition, fees and prior term balances before the first day of classes. Processing of form does not constitute a valid reason for late payment of fees at the University of Rio Grande.**
- Pay enrollment fees in a timely manner to both the host school and the University of Rio Grande. (Please Note: The University of Rio Grande will disburse financial aid according to the University of Rio Grande's disbursement schedule. If enrollment fees are due at the host prior to financial aid being disbursed to your account at the University of Rio Grande , it is your responsibility to pay your host school in a timely manner.) Financial aid received from the University of Rio Grande will not be directly transferred to your host school.
- Ensure that and official academic transcript from my host school is provided to the Ohio State Registrar's Office.
- Allow the University of Rio Grande and the host school to share information related to my enrollment and financial aid eligibility.

Student Signature:	Date:
	Date.

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	University of Rio Grande	
2024-2025	Office of Financial Aid	RG
Cons	ortium Agreement	
Please fill in the sp	aces below:	University of Rio Grande/Rio Grande
	he student's academic advisor or Records office representative.	Community College PO Box 500 Rio Grande, OH 45674-0500
(Student's Name)	enroll in the following courses at (Host School)	Financial Aid Office Phone:740-245-7218
Course: U	niversity of Rio Grande equivalent: niversity of Rio Grande equivalent:	Fax: 740-245-7102
Course:U	niversity of Rio Grande equivalent: niversity of Rio Grande equivalent: niversity of Rio Grande equivalent:	Email: finaid@rio.edu
student's degree program at the University	ourses listed will be accepted as fulfilling a requirement of the sity of Rio Grande.	
SECTION III: To be completed by	the student's financial aid advisor at the University of Rio Grande.	
My signature below confirms that I h with(Student's Name)	nave gone over the terms of the consortium agreement 	
To the best of my knowledge, the st	udent meets the terms of this agreement.	
Financial Aid Advisor Signature:	Date:	
Financial Aid Advisor Name Printed:		



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University of Rio Grande Office of Financial Aid

Consortium Agreement

Please fill in the spaces below:

SECTION IV: *To be completed by the host school's financial aid office.* Enrollment Dates at Host School: ______to ______

Please list below all courses the student plans to take at the host institution during the consortium term and the number of credit hours per course. (Please list additional coursework on a separate sheet, if necessary.)

Course:	Credit Hours:	_ (circle: semester/quarter)
Course:	Credit Hours:	_ (circle: semester/quarter)
Course:	Credit Hours:	_ (circle: semester/quarter)
Course:	Credit Hours:	_ (circle: semester/quarter)
Course:	Credit Hours:	_ (circle: semester/quarter)

Total Credit Hours:____

As a representative of the host institution you agree to:

- Confirm the student is in a transient/visiting status at your school taking courses that meet the Title IV, and State financial aid requirements.
- Not award any federal, state, institutional, or private aid during the time that the student is enrolled at your school
- Accept payment from the student, apply it to your enrollment charges and disburse any credit balance to the student in accordance with your school's policy.
- Notify the University of Rio Grande immediately and supply the effective date(s) if the student withdraws or drops any hours reported in this agreement.
- Upon the student's request, facilitate the release of an official academic transcript to Ohio State upon completion of the consortium term. (NOTE: The student's signature in Section I of this agreement authorizes the host institution to provide and official academic transcript to the University of Rio Grande.) Please send the transcript to the address below.

Signature:	Date:	
Printed Name and Title:	Office Phone	
Email Address:	Office Fax:	



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