



### Financial Aid Office

505 Amherst Street Nashua, NH 03063  
 ♦ Office hours M-Th: 8:00am-6:00pm and Fri: 8:00am-4:30pm ♦  
 Tel: (603) 578-8903 Fax: (603) 883-1636

## 2013-2014 Consortium Agreement APPROVAL TO TAKE COURSES AT ANOTHER CCSNH INSTITUTION

### Section I: To Be Completed by Student

Consortium Agreement between Nashua Community College and \_\_\_\_\_

Host College

Host College ID: \_\_\_\_\_

Student Name: \_\_\_\_\_ NCC ID: \_\_\_\_\_

Address: \_\_\_\_\_

Student e-mail: \_\_\_\_\_ Phone number: \_\_\_\_\_

Semester: \_\_\_\_\_ Major: \_\_\_\_\_

This agreement by and between Nashua Community College and \_\_\_\_\_ is made pursuant to Title IV regulations governing students taking courses at another institution for credit toward Nashua Community College degree or certificate programs.

Credit for the course(s) will be accepted as transfer credit by NCC provided grade earned is a "C" or better AND credit has not been earned via Challenge Exam, Credit by Exam or Pass/Fail grading. NOTE: Transfer credits do not affect grade point average at NCC. To be eligible for an NCC degree, students must satisfactorily complete a minimum of 16 credits of course work in NCC controlled courses with at least half of these credits in last semester major field courses. Exceptions require the approval of the Vice President of Academic Affairs and the Academic Standards Committee.

- THE COURSE(S) ARE APPROVED ONLY WHEN VALID SIGNATURE IS OBTAINED.
- COURSE DESCRIPTIONS MAY BE REQUIRED FOR APPROVAL.

Host College			Nashua Community College Equivalent		
Subject Number	Course Title	Credits	Subject Number	Course Title	Credits

### Section II: To be Signed by Nashua Community College VP of Academic Affairs

\_\_\_\_\_  
 Department Chair Signature

\_\_\_\_\_  
 Date Approved

\_\_\_\_\_  
 V.P. of Academic Affairs or designee Signature

\_\_\_\_\_  
 Date Approved

\_\_\_\_\_  
 Please Print Name  
 Nashua Community College

**Section III: To be Completed by Student**

**Student Authorization for:**

- Payment of Tuition and Fees to the Host College from Nashua Community College; and
- Release of Transcripts from Host College to Nashua Community College.

I authorize Nashua Community College to pay my tuition and fees to the Host College named below for the course(s) listed out of my financial aid award for the current academic year. I understand that payment will be made to the host college and I accept responsibility for any unpaid balances at both institutions. **I understand it is my responsibility to make sure all balances are paid at each institution.**

I authorize \_\_\_\_\_ (Host College) to release an official copy of my transcript to Nashua Community College. I understand that the course(s) will not transfer to NCC, to meet my program requirements, unless I receive a grade of "C" or better (grades of C- and below will not transfer), but all credits will be counted as attempted hours for Financial Aid purposes.

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

\_\_\_\_\_  
Please Print Name

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**Section IV: To be Completed by Nashua Community College Financial Aid Office**

**Certification of Financial Aid Eligibility**

The Financial Aid Office at Nashua Community College has a financial aid package which has been accepted by the student. He/she is eligible for financial aid in an amount sufficient to cover tuition and fees at Nashua Community College for the semester specified in this consortium agreement.

\$ \_\_\_\_\_ is the amount of Financial Aid available for the host college.

\_\_\_\_\_  
Financial Aid Officer Signature and Date  
Nashua Community College

\_\_\_\_\_  
Please Print Name

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**Section V: To be Completed by Host College Financial Aid Office**

**Verification of Registration**

I have reviewed the registration for the above named student for the semester specified and can confirm that, as of today, the student is registered for the course(s) listed below.

Subject Number	Course Title	Credits	Start Date	End Date

Total cost of the tuition and fees for the courses listed is \$ \_\_\_\_\_

\_\_\_\_\_  
Financial Aid Officer Signature and Date  
Host College

\_\_\_\_\_  
Please Print Name

cc:     NCC Bursar's Office     NCC Registrar's Office