

Atlanta Metropolitan College Consortium Agreement

PART I: TO BE COMPLETED BY THE STUDENT

This agreement is entered into between Atlanta Metropolitan College (Home Institution) and _____ (Host Institution) for the student listed below:
Student Name: _____ Social Security No: _____
Home Address: _____

PART II: TO BE COMPLETED BY THE HOST INSTITUTION:

Academic Year: _____
Semester of Enrollment: Summer ____ Fall ____ Spring ____
Cost of Attendance:
Tuition and Fees \$ _____
Room & Board \$ _____
Personal \$ _____
Books/Supplies \$ _____
Transportation \$ _____
Other \$ _____
Total Cost \$ _____
Total Aid Awarded \$ _____

Number of Credit Hours Enrolled: _____

PART III: STATEMENT OF CERTIFICATION:

- A. The Host Institution certifies that the student has been accepted as a Transient student at your Institution.
B. The Host Institution agrees not to pay the student Federal and/or State funds during the enrollment period listed above. In addition, the Host Institution agrees to notify the Home Institution if the student withdraws from the program before its conclusion. Satisfactory completion of the program will be provided by an academic transcript upon written request from the student.
C. The Home Institution agrees to provide payment to the student, if eligible, for the appropriate enrollment period. Payment will be made in such a manner as agreed to between the Home Institution and the student. **It is the student's responsibility to pay the Host Institution.**

PART IV: SIGNATURES: Only Financial Aid Officers are permitted to sign.

Home Institution (Atlanta Metropolitan College):

Host Institution:

Signature: _____

Signature: _____

Print/type name: _____

Print/type name: _____

Title: _____

Title: _____

Date: _____

Date: _____

RETURN COMPLETED FORM TO: Atlanta Metropolitan College

**Financial Aid Office
1630 Metropolitan Parkway, SW
Atlanta, Georgia 30310
404-756-4002 (office)
404-756-4834 (fax)**