Jamestown Community College, your home school, will process your financial aid based upon your combined coursework at JCC and classes you enroll in as a visiting student at another college, the host institution. This process is intended to recognize the combined level of enrollment for students pursuing a degree at JCC who are enrolled part-time at each institution. This agreement between the two colleges is used only to confirm which college will process and award your financial aid for your combined enrollment. **It is not a financial agreement for student account billing purposes.** You are responsible for payment of your student bills at each college, according to their respective payment policies.

- It is the students’ responsibility to submit the attached External Enrollment Agreement Form to the JCC Financial Aid office after all appropriate departments at each college have completed it.
- A completed External Enrollment Agreement Form is required for each semester of study at a host institution.
- The procedures below are listed in the order you should follow to successfully complete the External Enrollment Agreement Form. You are responsible for contacting each department for appropriate completion of this agreement.

1. **The student should complete the top half of page 1.**

2. **The student must receive confirmation that the course transfer equivalents taken at the host college are required for graduation and will count toward the JCC degree program of record.** The signature required in part B can be obtained from the JCC registrar’s office.

3. **The student must receive confirmation of enrollment and costs by having page 2 of the External Enrollment Agreement completed by the financial aid office at the host college.**

4. **The student must attach a copy of their course registration and billing statement from the host institution to the External Enrollment Agreement form.**

5. **The student is responsible for the timely completion and return of the External Enrollment Agreement to the JCC financial aid office prior to the due date of the JCC student bill.** The current semester due date can be found printed on your student bill and is based upon your registration date. Please be aware the date changes each semester.

**Questions?** Please contact us at:

Financial Aid Office-Jamestown Campus
Jamestown Community College
525 Falconer Street, PO Box 20
Jamestown, NY 14702-0020
716/338-1009 or 800/388-8557 ext. 1009

Financial Aid Office-Cattaraugus County Campus
Jamestown Community College
260 N. Union Street PO Box 5901
Olean, NY 14760-5901
716/376-7512 or 800/388-8557 ext. 7512
This External Enrollment Agreement, also known as a Consortium Agreement, is entered into between Jamestown Community College (JCC), the Home Institution, and __________________________, the Host Institution, for the purpose of providing federal Title IV and NYS financial assistance including grants and loans to the student named below for coursework required for an eligible Jamestown Community College degree and/or certificate:

The student is responsible to submit this fully completed form (both sides) to the JCC financial aid office by the semester student bill due date as published in the college master schedule. A separate external enrollment agreement is required for each semester of study.

To be completed by student for courses and period of enrollment listed below:

Name of Student: ______________________________________________________________________________________

JCC ID #:_____________________________ Last 4 digits of SSN   xxx-xx-_______    Date of Birth: ________________

Home Address:  Street: _________________________________________________________________________________

City: ________________________ _______________ State: __________ Zip: _____________

Degree and program of study at JCC __________________________________________________Program code:___________

Academic Semester: _______________________________ Dates of Enrollment: __/__/__ to __/__/__

Please mark one for current student status: (  ) Live with parents     (  ) Live in own home or apartment

Number of credits hours to be taken at JCC for the period of enrollment above: ___________________________

Titles and course # of class(es) to be taken at the Host Institution for the period of enrollment listed above:

Title:_________________________________________________Course abbr._____ Credit hours: _______________

Title:_________________________________________________Course abbr._____ Credit hours: _______________

A. The JCC registrar’s office confirms that the courses listed above will be accepted for credit according to JCC transfer credit evaluation policies for the following course equivalents, and are required for completion of the student’s current JCC program:

____________________________________________   Course abbr.______ Credit Hours:___________

____________________________________________   Course abbr.______ Credit Hours:___________

__________________________________________________________ ________________________

Signature of JCC Registrar

Date

B. I understand that I must notify the JCC financial aid office if I withdraw from or stop attending the course(s) at the Host Institution.

C. I agree to submit an official transcript of course(s) listed above to the JCC admissions office immediately after the period of enrollment has ended.

D. I understand that it is my responsibility to have the reverse side of this form completed by the host college financial aid office and to submit the fully completed form to the JCC financial aid office.

E. I understand that I am responsible to make formal arrangements regarding payment of my student bill at the host institution according to their policies.

F. I understand that if I am not eligible for sufficient financial aid to cover the charges at either institution that I am liable for all outstanding charges and will make immediate plans for payment.

Signature of Student: ________________________________________________ Date: ______________________
External Enrollment Agreement for: _________________________________________  xxx-xx-____________________

Student name          last 4 digits of social security #
_____________________________________________________________________________________________________
Host Institution   Name and Address
To be completed by the financial aid office of the Host Institution for courses and period of enrollment for student listed on reverse:

Pell Grant Cost of Attendance for academic year:   (student living at home)  $ _____________
Institutional Budget for Title IV Aid for period of enrollment:  (student living at home) $ _____________
Tuition and Fees charged to student for courses and period of enrollment:  $ _____________
Tuition only for Period of Enrollment:      $ _____________
Total Number of Credit Hours enrolled:             ____________

Dates of Enrollment  ___/___/___  to  ___/___/____                  Length of Period of Enrollment (weeks):  _____________

A. The Host Institution certifies that the above referenced student is enrolled for the period of attendance and courses listed on the reverse side of this form.

B. The Host Institution agrees that it will not pay the student state grant funds (TAP/APTS), Pell, and/or any campus-based funds and that it will not certify a Stafford or PLUS Loan for the period of enrollment listed above.

C. The Host Institution agrees to notify JCC of any institutional aid awarded the student for the period of enrollment listed on the reverse side of this form.

D. The Host Institution agrees to notify the JCC financial aid office if the student withdraws before the end of the stated period of enrollment and to provide amended Cost of Attendance figures.

E. Jamestown Community College agrees to accept college-level credits earned at the Host Institution for all applicable courses as indicated on the reverse side of this form according to JCC transfer credit policies.

F. Jamestown Community College agrees to disburse federal financial aid payments to the student, if eligible, according to the JCC disbursement schedule.

G. JCC agrees to monitor the student’s program of study and satisfactory academic progress and will administer the appropriate refund policy and return of Title IV funds.

Host Institution_____________________     Jamestown Community College
school name      525 Falconer Street
Jamestown, NY  14701
(716) 665-5220
___________________________________   ____________________________________
Signature      Signature
___________________________________   ____________________________________
Print Name      Print Name
___________________________________   ____________________________________
Title       Title
___________________________________   ____________________________________
Phone       Phone
___________________________________   ____________________________________
e-mail address      e-mail address
___________________________________   ____________________________________
Date        Date

Revised 04-2010