The two institutions named below are herein entering into a consortium agreement for:

______________________________________________________

________________________________________

Student Name

__________________________

WATC Program

Home Institution:  Wichita Area Technical College

Host Institution:  ______________________________

Wichita Area Technical College (WATC) will grant the degree, calculate the awards, disburse financial aid, monitor satisfactory academic progress and determine refund/repayment.

Student Responsibilities

• The student must initiate the consortium process by bringing a course schedule from the host institution to WATC.
• Payment for classes at the host institution is the responsibility of the student, regardless of financial aid eligibility.
• Student must notify each school when dropping or withdrawing from a class.
• Student is required to provide their grades to WATC’s Financial Aid office.

Procedure for calculating awards: The student’s award(s) will be based on total enrollment status at the host institution and WATC. The student’s budget will be based on total tuition and fees at WATC and the host institution and WATC’s allowance for books and supplies, room and board, transportation and miscellaneous expenses.

Procedure for disbursing awards: WATC will disburse financial aid (according to its policies) after the student has been awarded, accepted the awards, attended the first day of class at the host institution and the signed consortium agreement has been received from the host institution.

Procedure for determining refund/repayment: WATC will use its policy to determine the necessary refund/repayment if the student withdraws from any or all classes at WATC and host institution. If a refund or repayment is necessary, WATC will be responsible for returning funds to the appropriate program(s).

Procedure for keeping records: WATC will be responsible for maintaining copies of all documentation required for the student to receive financial aid through the consortium agreement process.

Other student eligibility requirements: WATC will be responsible for determining that the student has applied for admission as a regular degree seeking student in an eligible program and has been officially admitted.

*An official transcript is not necessary; a copy of grades will be sufficient. No aid for subsequent semesters will be posted until grades are received.
Student SSN: ____________________________  WATC ID: W000_____________________

**To be completed by WATC Career Planner or Financial Aid Specialist**

Please list the course(s) and credit hours the student is taking at the Host School that are required for a program at WATC:

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WATC Career Planner Signature: _______________________________  Date: ______________

**To be completed by the Host School**

Will the student receive financial aid at your school?  Yes  No

If your school is paying this student financial aid, please notify WATC's Financial Aid office as soon as possible.

If your school is not paying financial aid to this student, please complete the following:

Dates of enrollment: _______________________________

Number of credit hours enrolled: _______

Tuition costs: $_________________

Cost of books & required supplies: $_________________

Financial Aid Signature (Host School): _______________________________  Date: ______________

WATC Financial Aid Signature: _______________________________  Date: ______________

**Please return this form and documentation to:**

Wichita Area Technical College
Financial Aid
4004 N. Webb Rd.
Wichita, KS 67226

If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.