**WWCC CONSORTIUM AGREEMENT**

As allowed in Part 668.19, Student Assistance General Provision and Part 690.8, Pell Grant Program, Code of Federal Regulations, this consortium agreement is entered into between the institutions below for the purpose of providing federal financial assistance to the named student.

**THIS AGREEMENT IS ENTERED INTO BETWEEN:**

<table>
<thead>
<tr>
<th>THE HOME SCHOOL</th>
<th>AND</th>
<th>THE HOST SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>WALLA WALLA COMMUNITY COLLEGE</td>
<td>FOR</td>
<td></td>
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</tbody>
</table>

1. Student Name:  
2. Social Sec.#:  
3. Permanent Address:  
4. Permanent Phone#:  
5. E-mail Address:  
6. Name of Program:  
7. Expected Dates of Enrollment: (mmddyyyy) From: To:  
8. This agreement will apply to: Pell Grant □ FFELP or Direct Loans □ State Aid □

**TO BE COMPLETED BY HOST SCHOOL:**

9. The student will be enrolled in _____# units or _____ credits or Other:__________________________ 
   from ____________________ to ___________________ (specific dates)  
   which is considered ½ time ¾ time full-time enrollment less than ½ time

10. Please check the appropriate term for your institution: Quarter Semester Other:  

12. Enrollment Verification:  
   Please attach a copy of the official registration showing enrollment/courses for the above-listed term.  

**CERTIFICATION**

- The Host School certifies that the student listed has been accepted for enrollment in the program listed above (#6)  
- The Host School agrees not to pay the student Pell Grant and/or Campus Based funds or to process FFELP or Direct Student Loans during the enrollment period listed above (#7).  
- The Host School agrees to notify the Home School if the student withdraws from the program before its conclusion. Satisfactory conclusion of the program/courses will be evidenced by academic transcript upon written request of the student.  
- The Home School agrees to provide payment to the student, if eligible, under the programs listed above (#8) for the appropriate period of time.

**Home School: Walla Walla Community College**

Signature                  Date  
Danielle Hodgen, Financial Aid Director  
Printed Name and Title  
Telephone: 509-527-4303 Email: danielle.hodgen@wwcc.edu  
Comments:  

**Host School:**

Signature                  Date  
Printed Name and Title  
Telephone: Email:  
Comments: