

P: (276)-739-2463

Consortium Agreement Aid Year 2025

This agreement made between Virginia Highlands Community College, known as the "HOME INSTITUTION" and		
	known as the "VIS	SITING INSTITUTION" provides for cross-registration
for the purpose of establishing eligibility for	or financial aid for	
Student Name	SS#	Student ID
The VISITING INSTITUTION agrees to re INSTITUTION (VHCC):	egister the student who inten	ds to transfer the credits earned to the HOME
Semester:	Academic Year:	
Dept. and Number Course I	Description	Credits
The HOME INSTITUTION agrees to acc the degree of the STUDENT.	cept as transfer credits the	above listed courses and apply those courses to
The VISITING INSTITUTION agrees not	to award Pell or SEOG funds	s to this student during the term of this agreement.
The STUDENT is responsible for page	yments to the VISITING INS	STITUTION
The STUDENT is responsible for immedi VISITING INSTITUTION and requesting immediately following the conclusion of the	an official transcript of acade	STITUTION of any changes in enrollment at the mic credit from the VISITING INSTITUTION
This agreement terminates at the conclus	sion of the semester indicate	d above.
Student Signature	-	
For the HOME INSTITUTION (VHCC)		For the VISITING INSTITUTION
Signature	-	Signature
Julie Tilson		
Financial Aid Representative		Financial Aid Office Authorized Official
VISITING INSTITUTION forward form to: Julie Tilson Financial Aid Specialist P.O. Box 828 Abingdon, VA 24212 jtilson@vhcc.edu		Title