



Financial Aid Center

Consortium (Transient Student) Agreement

SEMESTER: _____

SECTION 1 (To be completed by the student)

Student Name: _____ FDTC ID Number _____

Please Print Full Name

The above named student has requested permission from Florence-Darlington Tech to attend your institution as a transient student for the enrollment period designated below.

- The student will reside: [] off-campus [] with parents
The student is classified as a (n): [] Dependent student
[] Independent student without dependents
[] Independent student with dependents

SECTION 2 (To be completed by the student and Florence-Darlington Tech Registrar)

You must know the classes for which you will enroll so that the Registrar can confirm that the credits will transfer into your current program at Florence-Darlington Technical College. You must also provide the beginning and ending dates of your classes before your eligibility for financial aid can be determined.

Registrar Office: Your signature on this form certifies that the courses to be taken at the visiting institution will transfer into the student's program of study at Florence-Darlington Tech, and confirms the number of credit hours the student will receive for each course the student successfully completes at the host institution. Also, student must take a minimum of one class at FDTC, please confirm this before signing below:

Table with 3 columns: Visiting Institution Course Name/Number, FD-Tech Credit Hours, Date Class Begins/Ends (mo/day/yr - mo/day/yr)

Signature of Florence-Darlington Technical College Registrar

Date

SECTION 3: (To be completed by the visiting institution)

_____ certifies that it complies with the following conditions:

Name of Institution (Visiting Institution)

- The student is enrolled in courses listed in **SECTION 2** at _____ and that course names and number of credits are accurate. **(Name of Visiting Institution)**
- Florence-Darlington Tech will be informed with (7) seven days of any change in enrollment status.
- The student's attendance and grades will be monitored.
- Grades will be provided at the end of the above term. Student must provide final transcript for the semester to the FA office along with the Registrar's office.
- Florence-Darlington Tech's Financial Aid Office will determine distribution of tuition refund.
- Tuition refunds will be returned to Florence-Darlington Tech within 30 days.

Name of Institution (Visiting Institution)

Signature of Official at Above Named Institution

Date

SECTION 4: (To be completed by Financial Aid Office of the above named visiting institution)

So that Florence-Darlington Tech may determine eligibility and forward funds accordingly, the following information for the student listed on Page 1 must be provided. Please complete the following using your student budget for the enrollment period indicated in **Section 2**, and your full-time academic year Pell Grant budget.

	Student Budget	Pell Budget	Student Enrollment:
Tuition and Fees	\$ _____	\$ _____	Full Time _____ Half Time _____ Less Than Half Time _____
Books and Supplies	\$ _____	\$ _____	
Room and Board	\$ _____	\$ _____	
Transportation	\$ _____	\$ _____	Provide Actual # of Credits: _____
Miscellaneous	\$ _____	\$ _____	Institution Award (if any): _____
Total	\$ _____	\$ _____	

Signature of Financial Aid Officer: _____ **Date:** _____

Please complete and return to: *Financial Aid Center, Florence-Darlington Technical College,
PO Box 100548, Florence, SC 29501*

Revised 5/20/14