CONSORTIUM AGREEMENT
BETWEEN
THE UNIVERSITY OF TEXAS AT EL PASO AND EL PASO COMMUNITY COLLEGE
(HOME SCHOOL) (HOST SCHOOL)

___________________________________________________
Email Address

Semester for which form is being completed:  □ Fall 200___  □ Spring 200___  □ Summer 200___

*APPLICATIONS WILL NOT BE ACCEPTED AFTER 20 BUSINESS DAYS FROM THE FIRST DAY OF CLASS

STEP 1: Complete and sign Section I
STEP 2: Please provide a copy of your EPCC class schedule to your UTEP Academic Advisor for approval of classes registered at EPCC, certifying that the courses will be applicable towards your degree plan. The complete EPCC name and course number must be listed on Section II.
STEP 3: Submit completed form to UTEP Office of Student Financial Aid. If you become eligible for additional funding, it will be provided on a reimbursement basis; the submission of this form does not necessarily result in additional financial assistance.

Section I – To be completed by student

I UNDERSTAND THAT:
1. I am designating The University of Texas at El Paso (UTEP) as my home school and have been accepted to a degree program at this institution.
2. I must be enrolled for at least half-time (6 hours) at UTEP in order to qualify for this consortium agreement.
3. I can only receive financial aid from UTEP.
4. Additional eligibility under this consortium will be determined after UTEP’s Census Date.
5. I must take courses at EPCC, which are transferable to my degree program at UTEP in order to receive financial aid. Courses must be pre-approved by a UTEP Academic Advisor.
6. I must make arrangements to pay EPCC tuition and fees by their payment deadline.
7. If I withdraw, I will fall under UTEP’s policies and procedures for refunds/repayments.
8. Courses taken under the Consortium Agreement will be considered as part of UTEP’s academic standing for Satisfactory Academic Progress (SAP) criteria.
9. I must meet the Satisfactory Academic Progress (SAP) criteria defined by UTEP.
10. This will affect any UTEP Scholarship I am receiving and might affect other financial aid I am awarded.
11. This agreement is applicable only for the semester indicated.
12. I cannot receive a Pell Grant and/or any Campus-Based funds at EPCC, nor will I be able to certify a Stafford Loan at EPCC, during the semester for which this form is being completed.
13. My signature on this form authorizes release of academic information between EPCC and UTEP.

Student Signature  Date  (over)
Section II – To be completed by UTEP Academic Advisor

**REMINDER:** The following classes are not covered by this agreement:

READ 0307    ENGL 0309    MATH 0300    MATH 0301

EPCC Course Name and Number (4 digit number)  UTEP advisor’s initials

_______________________________  ____________
_______________________________  ____________
_______________________________  ____________

**NOTE:** no alterations (white outs) or corrections accepted.

I certify the courses approved above are applicable towards the applicant’s degree plan.

__________________________________________  ___________________________________
Print Name and Title  Academic Department

_________________________________  ___________________  ___________________
Signature  Date  Telephone Number  email address

**SUBMIT COMPLETED FORM TO:**

Academic Services Building
Enrollment Service Center Room 101
or
Financial Aid Office Room 204

**FOR OFFICE USE ONLY-DO NOT WRITE BELOW THIS LINE**

Cost of attendance for the semester for which the form is being submitted:

   Tuition and Fees:  __________
   Books and Supplies:  __________
   Total:  __________

EPCC Hours: _______ UTEP Hours: _______ Total Hours: _______ FA Initials: _______