

Section II–To be completed by Host School

Will the student receive financial aid at your institution?

- Yes– STOP. Do not complete the remainder of this form. Please sign the form and return it to the student.
- No–If ‘no’ please complete the remainder of this form.

Course Prefix/Number/Name of Course from host school:	Credit Hours:	Tuition and Fees:	Enrollment Dates:

The Financial Aid Office at McDowell Technical Community College must be notified if the student drops or withdraws from the course(s) on this form.

Please return this completed form to the address and/or email below.

Host School’s Financial Aid Officer’s Signature	Printed Name
Telephone Number & Email	Date