

2017-2018 Participating Teacher Agreement

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|-------------------------------|-------------|--------------|---------------------------------|
| First Name | Middle Name | Last Name | Name on Credential if different |
| Street Address | City | | Zip |
| Home Phone | Cell Phone | Home email | |
| School | District | School email | |
| Years of teaching experience: | California | Out-of-state | Mentors First name |
| | | | Last Name |

Induction Candidates Please read the following *carefully*:

Professional Credential Candidate Requirements

- For each year of participation in the CCCOE Teacher Induction Program, I agree to attend and fully participate in the program requirements as described in the program handbook.
- For each year of participation, I agree to attend and fully participate in weekly contact with my mentor; completion of the formative assessment materials with my mentor and participation in formal classroom observations by my mentor.
- Advisement with the Teacher Induction Program Coordinator may be required when deemed appropriate by Teacher Induction Program Staff.

Professional Credential Candidate Acknowledgements

- I acknowledge that I may complete the CCCOE Teacher Induction Program in less than two years if I meet the requirements of the Early Completion Option (ECO).
- I acknowledge that failure to fulfill any of the above Teacher Induction Program requirements and/or responsibilities could result in my not receiving a recommendation for the Professional Teaching Credential.
- I acknowledge that if questions arise about the pairing of mentor, and myself, it is my responsibility to contact the Teacher Induction Coordinator in my district for consideration of reassignment.
- I acknowledge that the Teacher Induction Program requirements and responsibilities leading to completion of the California Professional Teaching Credential does not imply or ensure continued employment in my district of employment, as licensure requirement and employment criteria may differ.
- I acknowledge that information submitted for evidence of completion of the California Professional Teaching Credential is confidential and may not be used for employment evaluation purposes.
- I acknowledge that it is my responsibility to make timely progress toward completing the CCCOE Teacher Induction Program's requirements or I may incur an additional cost.
- I understand there may be a cost to me if I do not complete the program's requirements.

I have been advised that it is my responsibility to enroll in a Professional Teaching Credential Induction Program upon the start of my initial teaching contract. I have read and agree to follow the requirements and acknowledgements of the CCCOE Teacher Induction Program as stated above. By signing and dating this Participating Teacher Agreement I am enrolling in the CCCOE Teacher Induction Program.

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| Candidate Signature: _____ | Date: _____ |
| Authorized District Signature: _____ | Date: _____ |
| Induction Program Coordinator Signature: _____ | Date: _____ |