

ITEPP - Humboldt State University



STUDENT PARTICIPATION AGREEMENT

Your receipt of this agreement signifies that you have completed the application process and the Director ___ has approved your admission to the ITEP Program at Humboldt State University (HSU). You must sign this Agreement in order to become an active member of ITEPP, and you must comply with all the provisions of this Agreement in order to remain active in the program. After reading this Agreement in its entirety, please sign it and return the original for placement in your ITEPP student file. You will receive a copy during the ITEPP Orientation or when you enter the program. Congratulations and welcome to the ITEPP family!

I, _____, hereby agree to the following conditions and provisions of the ITEP Program at HSU:

1. As a full-time student, I will complete at least 15 units per semester as a student in good standing, or 12 units under special circumstances when prearranged with the ITEPP Student Support Coordinator/Advisor. (If I am a half-time student, I understand I can take no more than 6 units per semester.) All my course units will be applicable to my degree or credential objectives, including general education requirements, declared major, minor, depth of study, or emphasis requirements
2. I understand that (a) it is my responsibility to attend each and every class session, (b) failure to attend any classes during the first week of each semester will result in an automatic “drop” from the student roster, but it would be my responsibility to formally withdraw (c) I must check my class schedule and correct it before the add/drop deadline each semester. 18 units are the maximum units I can drop while pursuing my degree and I can repeat up to 16 units for a grade change (EO 1037).
3. If I complete an AIE or NAS minor, or MSW (American Indian Emphasis) they will be printed on my ITEPP Certificate of Completion. I must complete all the requirements for my chosen degree and receive a diploma in order to receive my Certificate of Completion. (See #4 for additional requirements to receive a Certificate of Completion.)
4. **In order to strengthen my leadership and organizational skills— as well as my collegial relationships with other ITEPP students— I will complete the ITEPP participation requirements during each semester I am in ITEPP.** _____ (initial)
5. I understand it is my responsibility to consult with my ITEPP Advisor **at least weekly** (by email, phone, or personal visit), and to check my email and ITEPP mailbox **at least twice weekly** for advisory messages and information. I understand that email is an official communication method of the university and that I will check in with Student Center to stay up to date.
6. I understand it is my responsibility to maintain at least a 3.0 cumulative grade point average (GPA) and to report progress in coursework during my weekly consultations with the ITEPP Student Support Coordinator/Advisor. _____ (initial)
7. I understand that in order to enter and complete the Teacher Preparation Credential Program, I must achieve an acceptable GPA as defined by California State University Chancellor’s Executive Order No. 758. _____ (initial)
8. I understand that my name, Tribal affiliation/political status, and academic achievements may be used in ITEPP public relations announcements and newsletters. _____ (initial)
9. I understand that the ITEPP Student Support Coordinator/Advisor periodically will send academic performance evaluation report forms to my professors in an ongoing effort to monitor my attendance, coursework, expected grades, etc.; I will review and check the accuracy of the returned evaluation reports in consultation with the ITEPP Student Support Coordinator. _____ (initial)
10. As an ITEPP student, I understand that the ITEPP Director/Student Support Coordinator and/or Advisor will monitor my academic performance and program participation. If I do not meet the minimum coursework/participation requirements in any given semester, I understand that I will be placed on probation for the following semester. I further understand that deficient performance in two consecutive semesters will cause me to have my status reduced to guest, and that I will have the right to submit a written appeal to the review committee. _____ (Initial).

Student Signature: _____ Date: _____