



CANDIDATE MEMORANDUM OF UNDERSTANDING

I, _____ am applying to participate in the Teachers College of San Joaquin
Administrator Induction Program.

I agree with the following requirements and responsibilities of participation:

(Initial)

_____ I understand that I must be currently serving in an administrative position and have activated my Preliminary Administrative Services Credential in order to be in the program.

_____ I understand that I must fully participate in all required aspects of the program.

_____ I understand that not meeting proficiency on all inquiries will require that I extend my time in the program.

_____ I understand that if any extension of my program is required, I am responsible for all costs related to the extension.

_____ I understand that I am required to complete two years in the program. If a leave of absence or a gap in employment occurs that requires an extension, I am responsible for all costs related to the extended program participation.

_____ I understand that if I have a qualifying reason to request an extension, I will immediately notify the TCSJ Administrative Induction Program Coordinators and my coach. TCSJ may confirm with my site and/or district of an extension.

_____ I understand that all information gathered regarding my practice and/or performance is confidential and will not be shared with my employer for evaluative purposes. TCSJ may share information regarding program completion with my site and/or district.

_____ I understand that my successful completion of all requirements within the program and demonstration of administrative competence will inform the TCSJ recommendation for my Clear Administrative Services Credential to the California Commission on Teaching Credentialing (CCTC).

_____ I understand that the recommendation for a Clear Administrative Services Credential is contingent upon 2 years of successful experience requiring an activated administrative services credential within a district, as verified by my Human Resources Director.



_____ I understand I am required to complete a TCSJ promissory note and payment plan agreement for this program and understand that I will not be recommended for my credential until my student account balance is paid in full.

_____ I must regularly check my TCSJ email.

_____ I must watch the Orientation video provided to me via TCSJ Email.

_____ I must complete all needed Inquiries, developed with the assistance of my coach, that address the required standards.

_____ I must complete all required Professional Development hours, as indicated on my Individual Induction Plan and on the candidate's log of hours.

_____ I must create, revise as needed, and complete an Individual Induction Plan each year and assemble all evidence in my inquiries on my Learning Management System

_____ I will ensure that my evidence links are set to "anyone with the link can view" and are accessible.

_____ I must make it a priority to schedule 40 hours of coaching time each year while in the program (80 hours total).

_____ I will develop a professional working relationship with my coach characterized by openness, trust, and reflection.

_____ I will identify sufficient coaching dates in partnership with my coach that will meet our hours of coaching time as required by the program.

_____ I will notify my coach immediately of unforeseen events that prevent me from making a scheduled coaching session in a timely manner. I will respond within 2 business days *to reschedule* a new time to meet with my coach.

_____ I will communicate in a timely manner with the TCSJ Administrative Induction Program Coordinators and my coach as questions and concerns arise about the program, including concerns about my coaching partnership.

_____ I will participate in the program evaluation processes and comply with all program reporting procedures.



TEACHERS COLLEGE

of SAN JOAQUIN

2721 Transworld Drive, Stockton CA 95206

_____ I understand if a withdrawal (voluntarily or involuntarily) from the program is necessary, I am responsible for all charges as per the Tuition Refund Policy located on the TCSJ Website.

I have read the above Requirements and Responsibilities and agree to follow them:

Signature:

Date:

District:

School Site:
