

# Participant Commitment Form

STATE OF CALIFORNIA

JERRY BROWN, Governor

## COMMISSION ON TEACHER CREDENTIALING

### Professional Services Division

1900 Capitol Avenue  
Sacramento, California 95811  
(916) 445-3223  
FAX (916) 323-4508



## CALIFORNIA CLASSIFIED SCHOOL EMPLOYEE TEACHER CREDENTIALING PROGRAM PARTICIPANT COMMITMENT AND AGREEMENT

This Agreement is entered into between the **Ventura County Office of Education** (herein after referred to as "the LEA"), and \_\_\_\_\_ (employee name), for the purpose of clearly defining both the LEA's and the participant's responsibilities in relation to his/her voluntary participation in the LEA's Classified School Employee Teacher Credentialing Program.

The participant agrees to act in good faith in all aspects of this Agreement and agrees to do all of the following:

- (A) Graduate from an institution of higher education under the program with a bachelor's degree.
- (B) Complete all of the requirements for, and obtain, a multiple subject, single subject, or education specialist teaching credential.
- (C) Complete one school year of classroom instruction in the school district, charter school, or county office of education for each year of assistance received for books, fees, and tuition while attending an institution of higher education under the program.
- (D) Comply with the rules and requirements of the LEA's program established by the participant's employer.

### *Certification of Acceptance of Terms of the Agreement*

I have read the Participant Commitment and Agreement for participation in the California Classified School Employee Teacher Credentialing Program and agree to comply with all terms included in the agreement.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date