



*Conejo Valley Unified School District
New Teacher Induction Program Memorandum
of Understanding*



NOTIFICATION OF ELIGIBILITY AND RESPONSIBILITY

Name: _____

Last four digits of your Social Security Number: _____

Assignment School: _____ Grade/Subject: _____

California Credential Out of State: _____

Multiple Subject

Single Subject: Subject(s) _____

Education Special: Specialty Area(s) _____

Induction Candidate

I have been informed of my responsibility to enter a professional teacher induction program in order to clear my preliminary credential. I have been provided information about the CVUSD Induction program requirements and expectations, which include fulfilling all program and credential requirements within the two year allotted time frame.

Signature Date

Conejo Valley Unified School District New Teacher Induction Program

Induction Candidate Participating Teacher Responsibilities for Credential Completion

The Induction Program requires the following criteria for participation:

The participating teacher will:

Provide all necessary preliminary credential information to the office of the Assistant Superintendent, Personnel Services, in a timely manner.

Meet weekly with assigned Mentor Teacher.

Develop an Individual Learning Plan (ILP) based on needs determined by the teacher and program provider, in consultation with the site administrator, and guided by the Preliminary Program Transition Plan.

Gather evidence for an ILP which demonstrates growth over time, as related to the Induction Program Standards and California Standards for the Teaching Profession (CSTP).

Develop growth goals, based on program standards and California Standards for the Teaching Profession (CSTP) that will be assessed by mentors and advisory counsel to determine induction program completion and candidate competence.

Complete all Induction Surveys by the due dates.

I agree to participate in the CVUSD Induction Program, as described, and understand that committed participation in the program and the completion of all program requirements are necessary if I am to receive a recommendation for my Clear Credential at the end of two years.

Print Name

Signature

Date