

Student Name _____

Gav ID: G00 _____

I understand and agree to the following as a participant of the Gavilan College CalWORKs Program:

1. I agree to participate in CalWORKs Orientation, Mandatory Meetings, Intersession, and/or Case Conferences as required to comply with both college and county processes.
2. I will develop an **Education or a Community Education Sequential Plan** with my CalWORKs counselor, register for classes, and obtain my counselor's approval to make changes to my schedule and/or overall academic goal.
3. I will develop an **Activities Plan** to review services I may be eligible for and to confirm my weekly hours of participation.
4. I will notify the CalWORKs office of any changes to my contact information such as phone number, mailing address or email address, and/or CalWORKs status within five (5) business days.
5. I will enroll in classes listed on my Education or Sequential plan and maintain good academic standing with Gavilan College.
6. I agree to keep my scheduled appointments or call to cancel or reschedule timely.
7. I understand that it is important to communicate with the Gavilan College CalWORKs program any circumstance that may affect my school progress, performance, or attendance in a timely manner.
8. I agree to meet with my counselor to discuss dropping or withdrawing from the college.
9. I understand that it is my responsibility to complete and submit monthly attendance reports to the Gavilan College CalWORKs program for my hours to be verified as required by my county.
10. I authorize Gavilan College CalWORKs staff to speak with educational personnel and/or faculty on my behalf regarding my progress and/or status in the course or program of study.
11. I understand as a student at Gavilan College I have rights and responsibilities to follow the processes and procedures as indicated in the Student Handbook (www.gavilan.edu/student/handbook/). It is my responsibility to review and understand the content, however I know that I may ask the CalWORKs staff questions for clarification and understanding.
12. I may be eligible for supportive services from my county and/or Gavilan College as funding allows:

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|---------------------------|------------------------------|--------------------------------|---------------------------------|
| <i>Childcare</i> | <i>Transportation</i> | <i>Grants</i> | <i>Supplies/Tools/Materials</i> |
| <i>Vehicle Repair</i> | <i>Subsidized Employment</i> | <i>Advance Payment (books)</i> | <i>Meal Cards</i> |
| <i>Housing Assistance</i> | <i>Parking Permits</i> | <i>Fees & Materials</i> | <i>Mental Health</i> |

As an eligible CalWORKs student, I hereby verify that I have read and understand my rights and responsibilities as a participant in the CalWORKs program at Gavilan College. I understand that failure to meet ongoing eligibility requirements set forth by my county and the college may result in a case conference with my worker, changes to my county WTW plan, discontinuance of services, and/or an overpayment processed by my county worker.

Student Signature

Date

Staff Signature

Date