

**CUESTA COLLEGE
CONTRACT FOR PROBATIONARY REINSTATEMENT**

Student ID Number: _____ Term: _____

Name: _____

_____ Academic Dismissal _____ Progress Dismissal _____ Both

I agree to meet the following conditions in order to continue my enrollment at Cuesta College.

1. _____ Attend a reinstatement workshop.
2. _____ Earn an end-of-term grade point average of 2.00 or better.
3. _____ Complete 50% of all attempted course work this term.
4. _____ Adjust my current enrollment as advised by counseling staff.
(i.e. number of credits or specific courses).
5. _____ Actively involve myself in services designed to support my enrollment as appropriate including tutorial services, learning disability assessment, and academic counseling.
6. _____ Actively involve myself in the classroom and establish contact with my instructors during available faculty office hours.
7. _____ If I receive an Early Alert Notice, I will respond immediately to all recommendations.
8. _____ Establish and update my Student Education Plan with assistance from a Cuesta counselor.
9. _____ Familiarize myself with student records and grading policies as outlined in the Cuesta College catalog.
10. _____ Obtain a copy of my grades for the term as soon as available.
11. _____ Other: _____

I understand that if my end-of-term grade point average is less than a 2.00, I will again be on dismissal and will be required to "sit out" for one full term (Fall or Spring). I will not be allowed to attend another reinstatement workshop offered through the Counseling Office. Any appeals to this action can be directed to the Vice President, Student Support or Executive Dean, North County Campus.

Student's Signature

Date

DETERMINATION

Director of Counseling, Vice President Student Support or Executive Dean North County Campus:

Date: _____

_____ Reinstatement

_____ Uphold academic dismissal

_____ Other: _____

Cuesta College Self-Designed Student Success Plan

The Self-Designed Student Success Plan can help with your academic status at Cuesta College. Consider what factors (problem areas) are contributing to your current academic status and pursue the solution to your problems. By identifying your problem areas and creating a solution to these problems, you avoid some of the unfortunate consequences of academic probation and dismissal.

The information gathered from the success plans may be used for statistical purposes.

| Problem Area | Solutions |
|--|--|
| Financial Problems | Financial Aid Library Bldg. Room 3121 546-3143 North Campus Room N3015 591-6202 |
| Minimum counselor contact | See counselor Teri <u>Sherman</u> Library Bldg. Room 3101B 546-3138 |
| Tutoring not considered | Seek tutorial services 546-3929 High Tech Learning Center Bldg. 3300 591-6215 North Campus Room N7000 |
| Excessive work hours Hours working per week _____ | Practice time management Library Bldg. Room 3153 546-3929 North Campus Room N5004 591-6215 |
| Limited communication with instructors | Meet instructor during office hours Refer to course syllabus |
| Enrolled in courses above academic level | Follow prerequisite recommendations Refer to class schedule or college catalog |
| Learning disability not identified | Seek DSPS services High Tech Learning Center Bldg. 3300 546-3149 North Campus Room N3024 591-6215 |
| Personal problems | See counselors of Health Services Health Center Bldg. 6500 546-3171 North Campus Room N3025 591-6200 |
| Scheduling classes difficulties | Meet with counselor to plan Student Educational Plan Library Bldg. Room 3101B 546-3138 North Campus Room N3013/N3019 591-6241 |
| Lack of transportation | Find alternate transportation/carpool Student Life & Leadership Bldg. 5125 546-3289 North Campus Room N3039 591-6200 |
| Child care issue | Discuss with CARE Coordinator in EOPS Library Bldg. Room 3133 546-3144 North Campus Room N3017 591-6214 |
| Procrastination | Take personal responsibility/Seek personal counseling Health Center Bldg. 6500 546-3171 Counseling Library Blvd. Room 3101B 546-3138 North Campus Room N3013/N3019 591-6200 |
| Lack of good study habits | Take Academic Skills courses |
| No place to study | Reorganize home/use library |
| Feeling alone/no support | Seek counseling, visit Student Life & Leadership 546-3289 |
| Depression/Mental health | See counselor of Health Services Health Center Bldg. 6500 546-3171 North County Campus Room N3025 591-6200 x4207 |
| Living Arrangements | Moved or resolved living situation |
| Other problems: _____ | Other solutions: _____ |

Student Name _____ Social Security Number _____ Semester/Year _____



Extended Opportunity Programs and Services (EOPS) Mutual Responsibility Contract (MRC)

____ Fall 20 ____

____ Spring 20 ____

____ New to EOPS ____

____ Continuing ____

Last Name _____

First Name _____

SS# _____

Student ID# _____

EOPS Student Responsibilities

1. *Complete a minimum of **three** EOPS counseling contacts **every** semester, at least fourteen (14) calendar days apart.
2. Schedule your counseling contacts and show up for your scheduled appointments **on time**.
 - a.) Cancel and reschedule your appointments in a timely manner if you are unable to attend.
3. * Maintain a minimum grade point average (GPA) of 2.0 each semester.
4. Submit progress report each semester by deadline established by EOPS/CARE Staff.
5. Notify your counselor if your educational goal changes so that your SEP can be kept current.
6. Inform EOPS if you change your name, address or phone number.
7. To respond to phone calls & messages from EOPS/CARE Staff.
8. Consult the EOPS counseling staff before withdrawing from classes or leaving Cuesta.
9. To refrain from in any way being verbally, emotionally, or physically abusive to any EOPS/CARE Staff. This behavior will not be tolerated and will result in your removal from the EOPS/CARE Program.

EOPS Staff Responsibilities/Services

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Academic planning, career exploration & educational advising 2. Personal problem solving & crisis counseling 3. FAFSA application assistance 4. Priority registration 5. College Success workshops 6. Help with scholarship applications and letters of Recommendation | <ol style="list-style-type: none"> 7. Book voucher for use at on-campus bookstore 8. Use of EOPS Lending Library 9. Use of student computers in the EOPS office with on-line access and limited free printing 10. Campus and community resource referrals 11. Alpha Gamma Sigma Honor Society (AGS) membership fee waiver 12. EOPS/CARE Cultural Activities |
|--|---|

Timeline for EOPS Services

Based on Title V Regulations, EOPS services end when you have:

1. Earned a total of 70 degree applicable units from any accredited institution,
- OR-
2. Completed six (6) consecutive semesters in the program (not including summer sessions).

Student and Authorized Staff Signatures

I understand that failure to fulfill the MRC requirement will result in suspension of services or other appropriate action as determined by the EOPS Coordinator. I also authorize the release of information from EOPS to appropriate college offices for monitoring of academic progress and program evaluation.

Signature of Student

Date

Signature of Authorized Staff

Disabled Student Programs and Services

A Student Educational Contract (SEC) is a plan to address your specific needs as a student with a disability. The SEC specifies the support services and classes that are identified and agreed upon by both you and a DSPTS Specialist as necessary to meet your specific educational needs. A SEC must be established upon initiation of DSPTS services. The SEC shall be updated annually by you and a DSPTS Specialist to review services and determine whether you have made progress toward your stated goal(s).

DSPTS Student Rights

According to the California Code of Regulations (Title V), the Rehabilitation Act of 1973 (Section 504), and The Americans With Disabilities Act of 1990 (ADA), you have certain rights.

- As a qualified student with a verified disability, you have the right to receive reasonable academic accommodations based on your educational limitations in order to have access to activities, programs, and services. The college faculty and staff shall not automatically reject an accommodation unless other effective, more feasible ones exist, or the identified accommodations have been determined to lower academic standards or otherwise fundamentally alter the nature of the program in question.
- Your participation in DSPTS shall be entirely voluntary.
- Receiving DSPTS support services/accommodations or DSPTS instruction shall not preclude you from participating in any other course, program or activity offered by the college.
- All records maintained by DSPTS personnel pertaining to your disabilities shall be protected from disclosure and shall be subject to the Family Educational Rights And Privacy Act requirements for handling of student records. However, your consent to release of information is not required as long as the disclosure is to other school officials (including instructors) within the college whom Cuesta College has determined to have legitimate educational interests. Portions of the information you present to DSPTS may be shared with the Chancellor's Office of the California Community Colleges or other state or federal agencies; however, disclosure to these parties is made in strict accordance with applicable statutes regarding confidentiality, including the Family Educational Rights And Privacy Act. According to Section 7 of the Federal Privacy Act, providing your social security number is voluntary.
- You shall not be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity in a public entity. In essence, you shall not be discriminated against in any way on the basis of disability.

If you wish to file a formal complaint or grievance regarding discrimination on the basis of disability, you should contact the DSPTS Director (805-546-3148) or the ADA/504 Coordinator (805-546-3129). You may also contact the US Department of Education Office for Civil Rights.

I have reviewed this page of DSPTS Student Rights.

student initials

date

DSPS Student Responsibilities

Disabled Students Programs and Services (DSPS) receives special funding to provide services to students with disabilities and is required to meet state and federal regulations. To help us comply with these regulations, you, as a student receiving DSPS services, have the following responsibilities:

- to provide DSPS with the necessary documentation of a disability;
- to request services;
- to meet with a DSPS specialist to complete a *Student Educational Contract*;
- to demonstrate measurable progress toward the goals in your *Student Educational Contract*;
- to notify DSPS in advance of any absences from class or appointments **if** you are using readers, interpreters, tutors, and/or other assistants (failure to notify DSPS might result in the loss of services);
- to return any equipment on loan from DSPS at the end of each semester (if the equipment is not returned, you will be held responsible for replacement costs);
- to maintain behavior appropriate in an educational setting; and
- to abide by the Student Code of Conduct and the Academic Honesty policy.

Student Code of Conduct at Cuesta College (Board Policy 6200)

You are held individually responsible to abide by the information contained in the Cuesta College Catalog and by the Student Code of Conduct. Failure to read and comply with college regulations will not exempt students from whatever penalties they might incur.

You are expected to conduct yourself in an acceptable manner while on campus and when representing Cuesta College in any off-campus activity. Specific rules and regulations and applicable penalties for violation of the Student Code of Conduct (Ed Code 66300) are available in the Office of the Dean of Student Services at any time. You have the responsibility to be aware of the College regulations.

Academic Honesty at Cuesta College

The Student Code of Conduct published in the Cuesta College catalog defines dishonesty as “. . . cheating, plagiarism, or knowingly furnishing false information to the college.” Such behavior shall constitute sufficient cause for the initiation of disciplinary action.

Policy for Suspension of DSPS Services

If you fail to follow the written policies and procedures for DSPS services, the DSPS Director will notify you in writing that you are in violation of the DSPS policies and procedures and that if you continue to be in violation, services may be suspended or terminated. You will be invited to discuss the issue in a meeting with the DSPS Director. A written notice will be sent to you when formal action is taken to suspend or terminate services. You will also be notified of the process for appeal of a decision to suspend or terminate services.

I have reviewed this page of DSPS Student Responsibilities.

_____ student initials

_____ date

San Luis Obispo Campus

Hwy 1 • San Luis Obispo, CA 93403-8106
(805) 546-3148 V/TDD • TCC (805) 546-3149
Fax: (805) 546-3930

North County Campus

2800 Buena Vista Drive • Paso Robles, CA 93446
(805) 591-6215 • TDD (805) 591-6216
Fax: (805) 591-6372



Print Clearly

Financial Aid Office
 PO Box 8106
 San Luis Obispo, CA 93403

| | | |
|------------------|---------------|-------------|
| Last Name | First Name | Student ID# |
| Telephone Number | Email Address | |

2012-2013 Supplemental Information Form

1. High School Completion Information –Please answer all questions A through E that applied to you:

- A. I am a high school graduate, graduation date: _____
- B. I received a General Education Development (GED) Certificate on _____
- C. I completed home school graduation requirements on _____
- D. I passed the Ability to Benefit Test (ATB) on _____ and first enrolled at Cuesta College on _____

Note: Students who enroll in a program of study after July 1, 2012, will no longer be eligible for federal aid under the ATB or 6 units of college coursework provisions.

2. Please mark the college you have attended and/or will attend for the current academic year.

| | | | |
|-------------|----------------|---------------------------------|--|
| Fall 2012 | Cuesta College | Not attending any college _____ | Attending Other School (please list) _____ |
| Spring 2013 | Cuesta College | Not attending any college _____ | Attending Other School (please list) _____ |
| Summer 2013 | Cuesta College | Not attending any college _____ | Attending Other School (please list) _____ |

3. All Schools Attended: Please list ALL schools attended since high school. Including Cuesta College, list all colleges, trade schools, vocational schools, and technical schools. Include an additional sheet if necessary

| List ALL schools attended since high school: include colleges, trade schools, vocational schools, technical schools. Attach an additional sheet if necessary | Dates Enrolled: | | Cumulative Units: (total units/hours attempted or completed at each school, whichever is greater) | Are these semester, quarter units, or hours? Check one: | | | GPA: |
|--|-----------------|-------------|--|--|------|-------|------|
| | From mo/yr | To mo/yr | | Sem. | Qtr. | Hours | |
| Cuesta College | | | | | | | |
| | | | | | | | |
| | | | | | | | |

4. Resources - Are you or will you be receiving any of the below resources for the following semesters? Check all that apply.

CalWorks Fall 2012 Spring 2013 Summer 2013 **EOPS** Fall 2012 Spring 2013 Summer 2013

5. What are you pursuing at Cuesta College? Please mark only one of the following all the way across the line.

| | | | | |
|--|--------|--------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> General Education Certification to transfer | If so, | have you attempted 90 units or more? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| <input type="checkbox"/> AA/AS Degree | If so, | have you attempted 90 units or more? | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Vocational Certificate | If so, | have you attempted 36 units or more? | <input type="checkbox"/> | <input type="checkbox"/> |

6. Student Financial Aid Agreement- Please initial ALL below statements:

- A. _____ I understand that Cuesta College reserves the right to modify my financial aid award(s) at any time due to changes in my federal, state or institutional eligibility.
- B. _____ I agree to report, in writing, to the financial aid office any changes in my financial, marital, academic, or residential status, or funds and support I receive from any source. I understand that any change in my status may result in a reduction of my award and may require repayment of my financial aid.
- C. _____ I have the responsibility to provide financial aid office, federal, state, and college auditors any additional information required at any given time in a timely manner.
- D. _____ I understand that to continue to receive assistance, I must maintain satisfactory academic progress as defined in the policy guide located on the web and that students are expected to complete their academic program within 150% of the time/unit/hours allotted for that program. . No students shall be granted financial aid beyond 150% of their program. Students may appeal the 150% limit. Please visit our website for additional information and instructions on how to complete an appeal form if applicable.
- E. _____ To receive financial aid you must be accepted for admission and enrolled in a program leading to an AA, AS, eligible certificate program, or transfer towards a bachelor’s degree at a four year college. A list of eligible financial aid programs can be found on our web site.
- F. _____ Within the first semester, it is highly recommended that you meet with a counselor and develop a Student Educational Plan with a degree objective leading to an AA, AS, transfer program to complete a 4-year degree or Certificate of Achievement that has been approved for federal student aid.
- G. _____ I understand that if my enrollment drops after receiving any federal student aid, I may owe all or a portion of my financial aid payment back and that financial aid funds are for educational related expenses only.
- H. _____ I understand that if I completely withdraw from classes, I may be subject to repayment of funds received from all Title IV programs. I further understand that I will have my debt sent to the Department of Education for collections if I do not repay the funds.
- I. _____ I understand that my Financial Aid payments will be adjusted based on my enrollment status at the time each payment is processed.
- J. _____ If interested in a student loan, I agree to attend a student loan workshop and complete the required online student loan counseling session, student loan request form and procedures for any loans to be awarded.
- K. _____ I have the responsibility to repay student loans. Failure to do so will allow Cuesta College to withhold records and/or my diploma.
- L. _____ I also agree to attend an online exit interview for student loans received, prior to graduation or withdrawal. Failure to do so will allow Cuesta College to withhold records and/or my diploma.

I have read and understand the above Rights and responsibilities. I hereby swear or affirm, under penalty of perjury, that all information on my Supplemental Information Form. I also realize that any false statement or failure to give proof when asked may be cause for the denial, reduction, withdrawal, and/or repayment of my aid.

Signature: _____ **Date:** _____

| For Office Use Only | Office Stamp |
|---|--------------|
| Form is complete: YES <input type="checkbox"/> NO <input type="checkbox"/> Reviewed by: _____ Form Incomplete returned to student on: _____ by _____ | |