

## **Administrator Induction Program**

### **Preliminary Administrator Letter of Commitment**

### **2019-20**

A core value of the Sonoma County Office of Education's North Coast School of Education (NCSOE) Administrator Induction Program (AIP) is a commitment to high quality individualized professional growth for every administrator in the program. Major objectives include supporting administrators to improve leadership practices and student learning based on using the California Professional Standards for Educational Leaders, and complete state and program requirements for earning a California Professional Clear Administrative Credential.

As with any partnership, each member contributes to the effectiveness of the results of a shared endeavor. Each Preliminary Administrator (PA) plays a key role in the development of a successful partnership with NCSOE AIP.

I, \_\_\_\_\_, agree to participate in the NCSOE Administrator Induction Program. I have read the Preliminary Administrator Responsibilities as described below. I understand that all program requirements must be fulfilled within two years in order to receive a recommendation for a *California Professional Clear Administrative Credential*. I also understand that I must enter an Administrative Induction Program within one year of activating my Administrative Credential. If, for any reason, I am unable to participate fully in the AIP, I understand that I must contact my Coach and the Program Director directly, and as soon as possible.

#### **Responsibilities as an AIP Preliminary Administrator (PA):**

1. Review the requirements for AIP with employer's credential analyst.
2. Develop a professional relationship with the Coach characterized by openness, collaboration, reflection, respect, and timeliness.
3. Meet with the Coach a minimum of two times per month (minimum of 4 hours total). Avoid cancellations, but if necessary, provide the Coach with appropriate notice (suggested 72 hours) of changes to meeting times and days.
4. Attend the program Orientation Seminar, two Sharecases and six mandatory CPSEL Seminars over the course of the two-year program.
5. Complete the Initial CPSEL Self-Assessment within the first 90 days of enrollment in AIP.
6. With the ongoing support of the Coach, compile evidence of practice and professional growth throughout the induction period resulting in a professional ePortfolio.
7. Participate in a three-way meeting with Coach and Supervisor a minimum of one time per year to develop and revisit Individual Induction Plans.
8. Complete an Individual Induction Plan for each of the six CPSELS.
9. Complete 20 hours of approved Professional Development per year.
10. Communicate questions or concerns about the responsibilities of the Coach, Supervisor, district, or AIP Program Director, as appropriate.
11. Participate in the program evaluation process (seminar evaluations, mid-year and year-end surveys, and Coach Feedback Form) and comply with district and project reporting procedures.
12. Support State accreditation process, including site visit interviews.

## Statement of Financial Obligation

I agree to fulfill the financial obligations of the program and make payments according to the payment schedule:

- **Early-bird Registration:** \$4000/year (must apply by Sept. 30<sup>th</sup>)
- **Register on or after Oct. 1st:** \$5000/year

Payments are due as follows:

- 50% of payment due- (Due Sept. 30<sup>th</sup>)
- Final payment due- (Due May 30<sup>th</sup>)
- Credit card payments can only be accepted if you are paying the full amount for the entire year
- Partial payments can be accepted via check or money order.

In addition, I understand I will be personally invoiced for the cost of the program and it is my responsibility to ensure payment is made either personally or through my employer. I understand that NCSOE will not submit the recommend for my clear credential to CTC until my account balance is paid in full.

By signing this letter of commitment, I am agreeing to enter into SCOE's NCSOE AIP. If I drop out of the program at **any time**, I understand I will be financially responsible for a portion or all of the enrollment fee.

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**Preliminary Administrator** *(please print)*

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**Preliminary Administrator Signature**

**Site:** \_\_\_\_\_ **District:** \_\_\_\_\_ **Date:** \_\_\_\_\_

After signing this Letter of Commitment, please make a copy for your records.

Send original to:

Attn: Yesenia Rivas-Suarez, Registrar  
Sonoma County Office of Education  
North Coast School of Education  
5340 Skylane Blvd. Santa Rosa, CA 95403  
yrivassuarez@scoe.org