

Student Name

Student I.D.

In order to remain eligible for all services through the CARE Program, I agree to:

- *1. Comply with the requirements:*
 - a) in the EOPS Mutual Responsibility Contract,
 - *b) by having a current FAFSA on file,*
 - c) by attending the required CARE activities and
 - *d*) *have unmet need verified by the Financial Aid office.*
- 2. Notify the CARE program staff when I experience any difficulties that impact my academic progress.
- 3. Not withdraw from enrolled classes without the approval of an EOPS/CARE Counselor.
- 4. Attend the mandatory Fall and Spring CARE Orientations.
- 5. Act in accordance with Mt. SAC's **Standards of Conduct Policy**.
- 6. *Provide a current TANF Verification form every year, dated after July 1.*
- 7. Use the EOPS/CARE Book and Supply Vouchers <u>ONLY</u> if I am not eligible to participate in ancillary services through the Mt. SAC CalWORKs office to prevent welfare fraud.

I understand that failure to comply with any of the above requirements will impact CARE services provided to me. I also understand that any pending appeals can delay or terminate eligibility for CARE services (i.e. CARE Book/Supply services or CARE grants).

Student Signature

Date

CARE Staff Signature

Updated Fall 2015