



## EOP Student Contract: Transfer Student

To maximize your success at CSUSM, please read and sign the following agreement in order to formalize your admission into the program.

### EOP agrees to:

- ✓ Provide academic guidance that leads towards completing your degree.
- ✓ Assist in clarifying academic, personal, and financial challenges by providing the tools and resources for success.
- ✓ Provide timely access to EOP counselors.
- ✓ Assist you in becoming “system smart” by navigating CSUSM.
- ✓ Provide opportunities for campus engagement and EOP community building.
- ✓ Provide you with priority registration for the first two semesters at CSUSM.
- ✓ Provide you with the EOP grant for your first year to help you gain a financial foothold (*if eligible*).

### As a newly admitted Transfer student I agree to:

- ✓ **Fulfill EOP’s mandatory admissions requirements:**
  - Attend EOP First Contact
  - Attend EOP Transfer Bridge (Fall Admits Only)
  - Attend EOP Welcome Events (Fall Admits Only)
  - Sign and submit copy of this EOP Contract
- ✓ **Fulfill EOP’s mandatory program contacts noted below within my first academic year. An EOP Registration Hold will be placed at the end of 4<sup>th</sup> week of the semester for students who have made zero semester contacts:**
  - ❖ *If I fall below a 2.5 cumulative GPA: Two mandatory contacts must be completed by meeting with my EOP Counselor for every semester until my GPA is above a 2.5.*

<b>EOP Contact Requirements (First Year)</b>
<ul style="list-style-type: none"> <li>○ <b>One</b> contact with my EOP Counselor to discuss immediate and long-term academic plans/concerns (First Contact: end of Week 4)</li> </ul>
<ul style="list-style-type: none"> <li>○ <b>Second</b> contact by:               <ul style="list-style-type: none"> <li>○ Meeting with my EOP Counselor <b>or</b></li> <li>○ Attending an EOP sponsored event</li> </ul> </li> </ul>
<b>TOTAL: 2 Contacts</b>



**EOP Student Contract: Transfer Student**

**After my first year, I will:**

- ✓ **Fulfill EOP’s mandatory program contacts noted below throughout my participation in EOP. An EOP Registration Hold will be placed at end of 6<sup>th</sup> week of the semester for students who have made zero semester contacts.**

- ❖ *If I fall below a 2.5 cumulative GPA: Two mandatory contacts must be completed by meeting with my EOP Counselor for every semester until my GPA is above a 2.5.*

<b>EOP Contact Requirements (after 1<sup>st</sup> year through graduation)</b>
<ul style="list-style-type: none"> <li>○ <b>One</b> contact with my EOP Counselor to discuss immediate and long-term academic plans/concerns (First Contact: end of Week 6)</li> </ul>
<ul style="list-style-type: none"> <li>○ <b>Second</b> contact by:           <ul style="list-style-type: none"> <li>○ Meeting with my EOP Counselor <b>or</b></li> <li>○ Attending an EOP sponsored event</li> </ul> </li> </ul>
<b>TOTAL: 2 Contacts</b>

- ✓ Complete the FAFSA or CADAA every year before **March 2<sup>nd</sup>** (if eligible).
- ✓ Meet with my major academic advisor, as needed.
- ✓ Visit the Career Center to explore post-graduation preparation resources & services.
- ✓ Attend an Exit Interview with my EOP counselor before withdrawing and/or taking academic leave.

**Photo & Video Release:**

- ✓ I understand that the Educational Opportunity Program (EOP) at CSUSM has my permission to use my photographs and video footage taken during any program events for future marketing products, websites, brochures/flyers, local/national publications, and as appropriate for EOP/CSUSM. If I wish to not be photographed/recorded is my responsibility to notify the event coordinator during the event.

***By printing my name, I commit to meeting all of the above conditions of this agreement. If I do not, I understand that I maybe dismissed from EOP and/or risk losing my EOP grant if awarded.***

**Student Name (Print):** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_