

North Carolina A& T State University  
**“SEE” Seeing Excitement in Education**  
**Application Packet**  
**Part B: Participation Agreement**



**C**arefully read the following agreement. Write your initials in the line to the left of each sentence to indicate that you understand and will comply with each of the following policies. Complete the information requested at the bottom of this form and sign.

\_\_\_\_\_ I understand this bridge program is to address the high need teacher areas of mathematics, science, and special education.

\_\_\_\_\_ I am currently enrolled at North Carolina A & T State University.

\_\_\_\_\_ I understand that I must have completed my freshman year of study with a cumulative GPA of 2.8 or higher.

\_\_\_\_\_ I understand in the purpose of this summer bridge program is to provide a licensure option. I agree to complete licensure requirements in (check one) \_\_\_\_\_ Science \_\_\_\_\_ Math or \_\_\_\_\_ Special Education.

\_\_\_\_\_ I understand that I am required to complete all licensure related credit hours in the SEE Program.

\_\_\_\_\_ I understand the SEE Program will provide a scholarship to help defray educational expenses related to completing 6 credit hours (e.g., tuition and related fees, room and board, books and supplies).

\_\_\_\_\_ I understand I must take the Praxis I \* (\*exempt if composite SAT is 1100 or ACT 24).

\_\_\_\_\_ I understand that the SEE Program will pay the Praxis I fee.

\_\_\_\_\_ I agree to allow the School of Education to obtain my academic records as it pertains to my progress at North Carolina A & T State University.

**B**y signing this agreement, I agree to successfully complete hours in the summer at North Carolina A & T State University in the “SEE” Program. I understand that the goal of the “SEE” program is to provide an option to pursue licensure for teaching.

Student Full Name (print): \_\_\_\_\_ Name you prefer: \_\_\_\_\_

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

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