Discovery Academy



St. Cloud Technical & Community College 1540 Northway Drive, St. Cloud MN 56303

Date

HIGH SCHOOL INSTRUCTOR AGREEMENT

Name:			
High Scho	ool:		
Fiscal Yea	ar:		
Course Na	ame:	Course Dates:	
	covery Academy Concurrent Enro SCTCC), I agree to:	ollment Instructor for St. Cloud Technica	al & Community
 Pa Cr fac Su pe Ma sta Res res Su en Pr de Co Ari alle 	articipate in annual discipline-specificate a course syllabus in compliant culty mentor; ubmit a final class roster to susan.jouriod is over (10th business day after aintain the rigor of the course to mean andards and covering all objectives equire students to complete the provisults with assigned faculty mentor; ubmit grades to the K-12 Initiatives and ing. ovide all necessary documents or presignee, and/or the assigned faculty by brespond and collaborate with the arange a minimum of 3 visits (in-personance including at least one in-class range for the class to visit and/or to ows); ollow the mentor interaction requirem Repeat course offerings with the times, including at least one in-	et the on-campus expectations by utilizing and topics found in the course summary; vided course evaluation at the end of the county and your faculty mentor within five (5) busing paperwork as requested by the Director of known mentor; assigned faculty mentor in a professional meson, electronic or telephone) with assigned a observation; are SCTCC at least once during the school of ments, listed here: he same instructor and mentor are required.	oproved by SCTCC I from the assigned coartment after the drop similar grading course and discuss ness days of course(s) K-12 Initiatives or nanner; faculty member per year (if school district d to interact three

High School Instructor Signature