



RIALTO USD Induction Program

Verification of Advisement & Orientation

This is to verify that I, _____ attended the initial Induction Advisement and Orientation on _____

I received, understand, and have signed the Induction Participant Agreement Form, and the Criteria for Clear Credential form after having these forms explained to me.

If I do not hold a California SB 2042 MS, SS or an Educational Specialist professional clear credential(s) at this time, I was informed of the requirements to obtain that credential, including the required participation in the District Induction Program when eligible. I received information regarding Mentor meetings and prospective professional development opportunities, and I was notified of the qualifications and procedures for requesting the Early Completion Option (ECO).

I was also notified of the support available to me as a new teacher in the Rialto Unified School District and understand that I will be assigned a Mentor within 30 days of enrollment in the program. Additionally, I was made aware of the procedures for requesting a Change in Mentor, the Teach Out Plan, and the Grievance Process.

1. Double click on this box to open the drawing window
2. Click on the line icon above and click on scribble
3. Write your name underneath this box
4. Erase this box so only your signature is present

Candidate Signature

Date

Site

Grade/Subject

Induction Mentor Name