



Family Economic Security Program

Participant Agreement

We are excited to have you as part of the FESP program. We are looking forward to working with you as you achieve your academic, financial, and career goals. The program has many benefits for you, but you also have some obligations to the program.

Please read the following carefully. You need to sign this agreement indicating your compliance in meeting the program expectations, as well as the proper release of necessary information to the FESP staff. Please return a signed original to Alana Wiens, LH B104.

By accepting the invitation to participate in FESP, I agree to the following terms for the duration of my participation in the program:

- For the first year I will meet with my Achievement Coach and Financial Coach monthly (at a minimum). During this time I will identify career, academic, and financial goals and develop plans to achieve those goals.
- After the first year, I will be with one coach a month (at a minimum).
- In working with the Financial Coach, I will provide full disclosure of my financial situation so that I may develop an action plan toward meeting my financial goals and increase my level of financial literacy. In partnership with my coach, I will develop a household budget.
- I will attend one all day retreat a semester with the FESP program.
- I will respond promptly to communication from the FESP staff.
- I will participate in the research component for the duration of my participation in FESP with FESP staff, Institutional Research, and our FESP evaluator, so that they can measure the progress of the program towards our goals.
- I authorize Housatonic Community College to share aggregate data with the Fairfield County's Community Foundation and other funders for the purposes of evaluation, reporting, and research.
- I understand that if I stop attending classes for one semester I must attend the retreats and remain active with the coaches in order to be eligible for FESP financial support in the next semester for which I am a registered HCC student.
- I authorize the use of my image in any photographs taken at FESP events for use to promote FESP or in reporting material.
- I will take part in FESP events to develop new donors and communicate with current donors.
- If there is any change to my status (registered student, head of household, employment, etc.) I will notify FESP staff immediately.

Financial Award Information:

- I will receive scholarships during semesters in which I am a registered HCC student and maintaining a GPA of 2.0 or over and completing my coaching obligations.



- I will use my scholarship funds for costs associated with pursuing my degree at HCC (tuition, books, transportation, child care, technology).
- I will complete a Thank You note for the donors of the program. This letter must be submitted to the FESP office.

I agree to the above conditions of this award and understand that the funds will not be credited to my account until this agreement is received and I have met with program staff.

Signature

Print Name

Date

Phone Number