I, ________________________________________, as a student hourly employee understand and declare that:

A. If a regular student employee, I am, during a regular class session, maintaining satisfactory progress in twelve (12) semester units.

B. If an Extended Opportunity Programs and Services (EOPS) student employee, I am, during a regular class session, maintaining satisfactory progress in nine (9) semester units.

C. If a Federal College Work Study student employee, I am, during a regular class session, maintaining satisfactory progress in six (6) semester units or equivalency.

D. If a Disabled student employee, I am, during a regular class session, maintaining satisfactory progress in six (6) semester units or equivalency.

E. If a Pre-School Education student employee, I am, during a regular class session, maintaining satisfactory progress in seven (7) semester units.

I understand that as a student hourly employee, I am limited to working a maximum of twenty-five (25) hours per week during regular class sessions.

I further understand that failure to maintain satisfactory progress in and to complete the above stated unit load requirements will result in my disqualification from any type of hourly employment with the College for at least the remainder of the semester.

Student Signature __________________________________________ Date __________________________

Witness Signature _________________________________________ Date __________________________