

CAREER PATHWAY: Administrative Professionals

Accountability Form - Employee

Employee's Name: _____

Department Name: _____

Division: _____

Classification/ Position Title: _____

I have expressed interest in participating in the Career Pathway: Administrative Professional Program offered through the Staff Center at CSUSM. I understand the program entails four (4) sections including core courses, technical courses, experiential learning electives and a capstone over a six (6) month period.

- Core courses and activities: 16 online courses plus additional activities and optional courses covering topics within introspection, organization, professionalism, relationship management, critical thinking and problem-solving, and communication.
- Technical courses: Five (5) courses and one (1) elective
- Experiential Learning Elective: one course or experience (networking, presentation delivery, service-learning)
- Capstone: Program portfolio project

All core courses are online courseware available 24/7 with internet connection. Technical courses can be tailored to my computer proficiency and completed online. Electives are a combination of courses, demonstrations, and volunteer opportunities. The capstone is a facilitated discussion offered at the end of the program.

I acknowledge that I have been properly advised that I am participating in a voluntary and optional program for professional/career development. I understand many of the program requirements include online, self-paced courses that can be completed on my own time. I understand I may request release time, when appropriate and in compliance with the employee's collective bargaining agreement. I further acknowledge that my participation in this program is optional and voluntary: does not guarantee stipends, bonuses, reclassifications, promotions, and/or transfers.

Employee's Name: _____

Email: _____

Employee's Signature _____

Date: _____