

**PARTICIPATION AGREEMENT FORM**

FOR THE COHORT ENTERING FALL 2025 DUE BEFORE: June 1, 2025

Huston-Tillotson University
Office of Admissions and Recruitment
Attn: Summer I.D.E.A.L Academy
900 Chicon Street
Austin, Texas 78702

INSTRUCTIONS: Print or type all information. Return forms to the Huston-Tillotson University Office of Admissions and Recruitment. Pay your **non-refundable** commitment fee of \$100, via the Cashnet payment portal or check or money order payable to Huston-Tillotson University with student name and HT ID number. **This Participation Agreement Form must be received before May 1, 2025. If participation offer is made after June 1st, the Participation Agreement Form and the non-refundable commitment fee of \$100 is due two weeks after receipt of your letter of participation offer.**

HUSTON-TILLOTSON SUMMER I.D.E.A.L ACADEMY: As a condition of not meeting the required GPA for regular admission, you have a unique opportunity to participate in an enriching six-week program at no out of pocket cost. The Summer I.D.E.A.L. Academy is specifically designed to set you up for success through an intensive academic and residential experience. You will enhance your academic skills, grasp the significance of academic excellence, and develop practical study skills, all while receiving personalized tutoring and mentorship.

By satisfying all academic requirements of this program by the end of the summer, you will secure your place for the fall semester. Completing this transformative experience will not only allow you to officially register for the fall but also apply the credits earned during the Summer I.D.E.A.L Academy towards your degree. Take advantage of this chance to demonstrate your potential and excel in your academic journey!

READ CAREFULLY BEFORE SIGNING: Once signed and returned to the Huston-Tillotson University Office of Admissions and Recruitment, this agreement represents your commitment to participate in the Summer I.D.E.A.L Academy. Signing and returning this Agreement indicates your full comprehension and acknowledgment of all Summer I.D.E.A.L Academy requirements and expectations at Huston-Tillotson University.

1. Participation in the Summer I.D.E.A.L Academy is required for students to continue enrollment in the fall term as a condition of not meeting the required admissions GPA for regular admission.
2. Your \$100 commitment fee is **non-refundable**. Admission into the program is restricted to the term posted on this agreement and is **not transferable** to a future term.
3. You agree to the terms and conditions regarding payment of charges related to your participation in the Summer I.D.E.A.L Academy. The program is designed to be fully covered by grants and financial aid through FAFSA for eligible students. You are responsible for ensuring that all necessary documentation and applications for financial aid are submitted and processed in a timely manner. While the program costs are intended to be covered by financial aid, you understand that if grants or FAFSA funds are not received, are rescinded, or are adjusted, you assume responsibility for any remaining balance owed to Huston-Tillotson University. Failure to address outstanding balances may result in late charges, a hold on your account, and the potential transfer of your account to collections, which may impact your ability to matriculate as a full-time student at Huston-Tillotson University.
4. You are responsible for maintaining the high school grade point average (2.0+) to participate in the Huston-Tillotson University Summer I.D.E.A.L Academy.
5. Applicants must submit a final official high school transcript to Huston-Tillotson University Office of Undergraduate Admission and Recruitment prior to the program start date.
6. In signing this agreement, you accept and agree to abide by the policies and regulations of Huston-Tillotson University concerning drug and alcohol abuse and understand that the unlawful use of drugs or alcohol will subject you to the penalties contained in those policies and regulations. You will comply with the policies and the code of student conduct established by Huston-Tillotson University. Huston-Tillotson University's policies and code of student conduct will apply to all academic, class-related, and non-academic matters associated with your participation in the Summer I.D.E.A.L Academy. In the event of specific cases requiring further clarification, the university reserves the right to determine the most pertinent policies and codes of conduct under the facts.

NAME: _____ HT ID# _____

COMPLETE HOME ADDRESS _____

CITY _____

STATE _____

POSTAL CODE _____

NEW ADDRESS? **Y/N**

STUDENT SIGNATURE _____

TODAY'S DATE _____

By signing above, I accept the terms and conditions of this agreement and give Huston-Tillotson University (HT) permission to collect and exchange information relevant to my participation in the Summer I.D.E.A.L Academy with authorized university offices and departments as necessary to facilitate my enrollment and success in the program.

Parent Signature (if under 18 years old): _____

FERPA Release Waiver

It is the policy of Huston-Tillotson University (HT), in accordance with the Family Educational Rights and Privacy Act (FERPA), to withhold personally identifiable information contained in our students' educational records unless the student has consented to disclosure or FERPA allows disclosure. Directory information, such as enrollment, academic honors, and degrees, may be disclosed to the public. However, private information, such as address, phone number, grades, class schedules, the student's account, and financial aid awards, may not be released without express consent from the student.

Signing this form provides such consent, according to the information designated for release and to whom it is to be released.

I, _____, authorize Huston-Tillotson University to release the following educational records, upon request, to the persons listed below, for the purpose of facilitating the financial aid process, assisting in satisfying outstanding financial aid requirements, addressing any outstanding balances owed to Huston-Tillotson University, and all other educational records relating to my participation in the Summer I.D.E.A.L. Academy.

Please initial all that apply:

_____ All academic/educational records _____ All contact information
_____ All Financial Aid Information* _____ All Student Conduct/Disciplinary Records

*(Including but not limited to financial aid status and award (amounts, types of awards, etc.); outstanding financial aid documents; contents of FAFSA application; contents of financial aid documents; current state and amount of charges; all Residence Life, meal plan, Access Orientation, and related student services fees)

_____ Other _____

Person(s) to whom information may be released:

Name: _____ **Relationship to me:** _____

Their e-mail address: _____

Their date of birth (XX/XX/XXXX): ____/____/____ Their Social Security Number (last 4 digits only): XXX-XX-____

Name: _____ **Relationship to me:** _____

Their e-mail address: _____

Their date of birth (XX/XX/XXXX): ____/____/____ Their Social Security Number (last 4 digits only): XXX-XX-____

Name: _____ **Relationship to me:** _____

Their e-mail address: _____

Their date of birth (XX/XX/XXXX): ____/____/____ Their Social Security Number (last 4 digits only): XXX-XX-____

The purpose of this release is to convey information relative to my participation in the Summer I.D.E.A.L. Academy. I acknowledge by my signature that I understand, under the Family Educational Rights and Privacy Act (FERPA), I have the right not to consent to the release of my educational records. I am giving my consent to release the designated information to the above-named person(s). I understand that this release will remain in effect unless I revoke such consent in writing and the revocation is received and processed by Huston-Tillotson University.

Signature: _____ **Date:** _____