

***Extra Responsibility Agreement***

I have reviewed the schedule of training for the Teacher Preparation and Certification Program at Region 7 ESC during the current school year and understand that the training is one of the requirements specified by the State Board for Educator Certification for teacher certification.

I will work with \_\_\_\_\_ to arrange for him/her to attend the required on-going training.

\_\_\_\_\_  
Athletic Director/Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Date

\_\_\_\_\_  
Intern

\_\_\_\_\_  
Date

Please return to:  
Region 7 ESC TPCP  
1909 N. Longview St.  
Kilgore, TX 75662