



FOREIGN-TRAINED PROFESSIONALS PROGRAM PARTICIPATION AGREEMENT

By means of this Agreement I am committing to participate in the Miami Dade College's Foreign-Trained Professionals (FTP) Program ("the Program"). In exchange for permission to participate in the Program, I agree to the terms listed below. I also understand that Miami Dade College will not allow me to participate in the program unless I enter into this Agreement.

THEREFORE, I STATE THE FOLLOWING:

1. The term "the College" as used in this Agreement shall mean Miami Dade College, its District Board of Trustees, officers, directors, employees, volunteers or agents.
2. No one associated with the College or with the Program has made any representation or promise to me about the matters covered in this Agreement, apart from what is written in this Agreement. Accordingly, this document contains the entire agreement between the College and me with respect to the matters covered by the Agreement. I understand that the terms and conditions of this Agreement are contractual and legally binding.
3. I understand and agree that this Agreement is intended to provide as much protection to the College as the laws of the State of Florida permit. If any part of this Agreement is illegal, I still agree to be bound by the remaining lawful provisions of this Agreement.
4. I understand and agree that the laws of the State of Florida will control and will be used to interpret this Agreement. The laws of the State of Florida will govern any legal action arising out of my participation in the Program. I further agree that any legal actions arising out of this Agreement must be filed in a court of jurisdiction in Miami-Dade County, Florida.
5. I understand that this agreement is binding not only on the College and me but also on our respective representatives, heirs, estates, beneficiaries, successors and assigns.

AND AGREE TO THE TERMS AND CONDITIONS PROVIDED BELOW:

1. I agree that services may only be provided upon confirmation of **active status** at the College and **submission of foreign, postsecondary, University credentials** required by the College.
2. I agree that **all** evaluations of postsecondary, University credentials paid for by the Program **must be sent to the College** directly from an organization belonging to the National Association of Credential Evaluation Services ([NACES](#)).
3. I agree that my application to the College will include complete original transcripts with original translation from a certified translator. I agreed that **all documentation** must have all the requisite **seals and apostilles** from the Ministry of Exterior Affairs or Ministry of Foreign Affairs of the country where the transcripts were issued.

4. I agree that acceptance of **transfer courses are subject to approval by the College.**
5. I agree to **grant permission to the College to use** photos, images and/or videos of me for advertising and publicity purposes including but, not limited to brochures, websites, newspaper articles, reviews, print advertisement, and other promotional materials. Permission is also hereby granted for
6. the College to copyright such materials in its name. I understand that my personal information, such as name, address, age, etc., will not be released. I also understand that I will receive no monetary compensation for the use of my photo, images, or videos that include me.
7. I agree that the Program may **change services provided** and understand that the College reserves the right to make changes, including, but not limited to: the roster of services provided, stipend allocations and participant requirements to reflect funder requirements as well as the College's policies and rules of procedure.
8. I agree that my initial and continued participation in the program is contingent upon being in good academic standing and that disciplinary actions resulting in expulsion or suspension will result in the **termination of services.**

I HAVE READ EACH AND EVERY WORD IN THE FOREGIN-TRAINED PROFESSIONALS PARTICIPATION AGREEMENT. I FULLY UNDERSTAND ALL OF THE TERMS AND CONDITIONS OF THIS AGREEMENT AND THEIR SIGNIFICANCE. I VOLUNTARILY SIGNED THIS PARTICIPATION AGREEMENT.

Name: *(please print)* _____

MDC-ID#: _____ **Major:** _____

Signature: _____ **Date:** _____