**MEMORANDUM OF UNDERSTANDING**

**SOUTH ISLAND PARTNERSHIP**

**(CAMOSUN COLLEGE AND SCHOOL DISTRICTS 61, 62, 63, 64, AND 79)**

**PARTNERSHIP AGREEMENT ON POST-SECONDARY TRANSITION**

**Philosophy**

Camosun College and School Districts No. 61, 62, 63, 64 and 79 will work in partnership to develop and deliverer education and training programs that provide secondary school students with smooth transitions from secondary to post-secondary education.

**Principles**

1. The South Island Partnership will:
	* offer courses and programs to enhance academic success for secondary school students interested in skilled trades;
	* offer programs, course and processes that will enhance transitions for secondary school students to a post-secondary environment;
	* develop courses and programs that provide dual credit towards both secondary school graduation and post-secondary education;
	* publish a list of available articulated programs and courses including capacities;
	* promote dual credit offerings at secondary school gatherings and events;
	* reduce barriers that prevent students from participating in dual credit programming;
	* develop resources that build program sustainability; and
	* develop sub-agreements as needed of this MOU for each programming area outlining capacities, program duration, student tuition and fees and quotas. The details of these sub-agreements will be reviewed annually.
2. All secondary school students participating in dual credit programming at Camosun College will be bound by policies and procedures applied to all other Camosun students.
3. Students participating in dual credit programming will be able to continue directly after secondary school graduation to subsequent levels of education at the College to finish the credential.
4. The Camosun College South Island School Districts Partnership agrees to operate within the agreement for a term of three years after which the agreement may be extended by mutual consent.
5. A party may withdraw from this Agreement December 31 of each year for the following September intake.

Signed:

**Name**

**Position**

**Signature**

**Date**

(of all parties involved)