



**Campus Affiliation Agreement (*continued*)**

**Instructor or SkillsUSA advisor agreement:**

I have read and agree to the terms listed above:

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Signature and Title of SkillsUSA Advisor

**Campus administrator agreement:**

I have read and agree to the terms listed above:

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Signature and Title of an Authorized Campus Administrator\*

*\*Department head, dean, president or other program administrator*

*\*\* State approval is required to participate in the SkillsUSA Campus Affiliation Plan*