

**SUPERVISOR ACKNOWLEDGMENT**

Please have your supervisor review the time commitment and indicate his/her support of your application by signing the below statement.

Upload the signed statement with your application.

**SUPERVISOR'S SIGNATURE**

Participation in the Department of Diversity, Equity and Inclusion Diversity and Inclusion Certificate Program will require a commitment averaging 6 hours per month during regularly scheduled work hours and attendance at program events is **mandatory**. Your signature acknowledges your understanding of these requirements and your support of \_\_\_\_\_'s application.

\_\_\_\_\_  
**Supervisor Printed Name**

\_\_\_\_\_  
**Supervisor E-mail**

\_\_\_\_\_  
**Supervisor Signature**

\_\_\_\_\_  
**Date**