

Employer Letter of Support

Doctorate in Leadership

If the applicant is a full-time employee, an Employer Letter of Support form from the current employer indicating support of the applicant's intent to pursue doctoral studies while maintaining the professional relationship must be submitted with your application packet.

Part 1

TO BE COMPLETED BY THE APPLICANT

applicant's name

phone

applicant's mailing address/city/state/zip

Application to begin the program in fall of the year 20_____

Applicant's signature

date

Part 2

TO BE COMPLETED BY THE EMPLOYER

The person whose name appears above has applied for admission to the Doctorate in Leadership program at Hardin-Simmons University. Please indicate your support for this person's intent to pursue doctoral studies while remaining as your employee. *Note: feel free to use the back of any page as necessary for further comments.*

your name with title (if relevant)

address/city/state/zip

email address

Phone numbers: (____)____-____ (____)____-____

How well do you think you know the applicant? Casually Well VeryWell

How long have you worked with him/her? ___ years ___ months

Has the applicant explained the requirements for participation in the program? Yes No

Do you fully support his/her intent to pursue doctoral studies while remaining as your employee? Yes No

Signature_____Date_____