

Leadership Strategies Spring 2008 Nomination Form

A Program of the Leadership Development Center at UVa

You are invited to complete the following information and fax or mail to the UVa Leadership Development Center. Information must be received by Monday, February 29, 2008.

Nominated Employee Information:

Full Name: _____

Department / Unit / School: _____

Working Title: _____

Number of Direct Reports _____

Total Number of Employees that Ultimately Report to You: _____

Email: _____ Office Phone: _____

Briefly state what you hope to gain or how you hope to benefit from participating in this program:

Supervisor Information:

Full Name: _____

Department / Unit / School: _____

Working Title: _____

Email: _____ Office Phone: _____

PTAO: _____

Briefly state why you are nominating this candidate:

Attendance Policy: You agree to participate in all sessions of this program unless prior approval is granted for specific absences. Your participation in all sessions is necessary in order to graduate from the program and to benefit from the content provided.

Cancellation Policy: If you need to cancel your registration after March 10, one/half the cost of the program will be charged to your department.

Photography: I give my permission for photographs taken during this session to be used in future marketing for the UVa Leadership Development Center.

Supervisor Name *(Please Print)*

Employee Name *(Please Print)*

Supervisor Signature

Employee Signature

