



Supervisor Accountability Endorsement

(Application Supporting Document for Signature)

To be completed and signed by Applicant's supervisor or person to whom Applicant is primarily accountable:

As the immediate supervisor of _____, I have read the description of "CityLeaders Responsibilities," and agree to the following:

- I will allow them time off from regularly assigned duties to participate in all required activities of the program. (The supervisor and applicant will agree on how to account for the excused time.)
- I understand that the CityLeaders program is NOT able to provide a stipend to cover travel or registration to the CityMatCH conference.
- I will support the applicant's use of newly learned/developed knowledge, skills, attitudes, and competencies in her/his work.

Print or Type Name:

Title:

Organization Name:

Telephone:

Email:

Signature: _____

Date: _____

Sign, date, and email this form to CityMatCH to complete application: Ashleigh Sutphen at ashleigh.sutphen@unmc.edu.