



## BUILDING CORE SUPERVISORY COMPETENCIES PROGRAM APPLICATION

### Applicant Information

Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Department: \_\_\_\_\_ Current Title Code: \_\_\_\_\_

Length of employment at UCR \_\_\_\_\_ Number of years of \_\_\_\_\_

(years): \_\_\_\_\_ supervisory experience: \_\_\_\_\_

Number of staff supervised: \_\_\_\_\_ Payroll titles of staff \_\_\_\_\_

supervised: \_\_\_\_\_

### Supporting Information

1. How will this program assist you in your current position? What are your desired outcomes from participating?

2. How do you plan to apply what you learn in the program? What steps will you take to ensure that you transfer your learning?

As the applicant's supervisor, I understand that this program has a fee of \$649, and I approve of their participation.

Supervisor's Signature

Date

I understand that this program takes place over several months, and requires me to complete all requirements to obtain a Certificate of Completion. I understand that this program has a fee of \$649, and will require a COA for participation. I understand that the cost of electives is not included in the program fee.

Applicant's Signature

Date