

2017-2018  
Leadership Empowerment Program  
Sponsored by  
The Office of Diversity and Inclusion

**SUPERVISOR'S SUPPORT FORM**

Applicant's Name: \_\_\_\_\_

The person named above has applied to the LEP for this academic year. As this individual's supervisor, you are asked to provide a letter of support.

**1. I rank this applicant's career potential as:**

excellent                       above average                       average

**2. Should this person be chosen to participate, as the supervisor, I will give this person release time to attend the following:**

- sessions with mentors
- two-day orientation
- monthly, day-long LEP seminars
- relevant conferences and workshops (local, regional, or national)
- on-campus meetings with LEP participants

SUPERVISOR'S SIGNATURE: \_\_\_\_\_

\_\_\_\_\_  
Title/position:

\_\_\_\_\_  
Date:

**3. On a separate sheet, please write a letter of reference for the candidate, listing talents, skills, and experiences, AND explaining how the candidate will benefit from the program.**

*The candidate is responsible for submitting a completed application, including this form on Friday, March 17, 2017.*

*Thank you for your support of the Leadership Empowerment Program.*

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