

**REAFFIRMATION OF SUPPORT FOR PARTICIPATION IN THE
2021-2022 APGO ACADEMIC SCHOLARS AND LEADERS**

I attest, with my signature, that _____ is a faculty member in good standing in my department whose interests and talents lead me to believe that he/she would be an excellent individual to be engaged in this educational program.

I have reviewed the information concerning the APGO Academic Scholars and Leaders Program with this candidate, who is a member in good standing of APGO. By signing this statement, I pledge my support to his/her involvement in this program.

Specifically, I agree to:

- (1) support this faculty member throughout the 15-month curriculum with respect to individual projects and local assignments;
- (2) encourage the support of other faculty and personnel in participating in such projects;
- (3) provide the expenses for this faculty member to attend the following:
 1. **2021 APGO Martin L. Stone, MD, Faculty Development Seminar: Westin Kierland Resort and Spa, Scottsdale, AZ**
January 5-9, 2021 – APGO Academic Scholars and Leaders Program sessions
January 9-12, 2021 – APGO Martin L. Stone, MD, Faculty Development Seminar
 2. **2021 CREOG & APGO Annual Meeting: JW Marriott Hill Country, San Antonio, TX**
March 1-3, 2021 – APGO Academic Scholars and Leaders Program sessions
March 3-6, 2021 – CREOG & APGO Annual Meeting
 3. **Summer session: August 2021, Location TBD**
August 2021 (exact dates TBD) Two full days of ASL Sessions (plus travel time)
 4. **2022 CREOG & APGO Annual Meeting: Rosen Shingle Creek, Orlando, FL**
2022 CREOG & APGO Annual Meeting to participate in research presentations and the graduation awards ceremony.
March 9-12, 2022

I also pledge that, upon completion of this curriculum, this faculty member will be provided responsibilities commensurate with the knowledge and skills learned from this curriculum. Further, fulfillment of these responsibilities will provide important evidence with respect to academic promotion and securement of tenure, if applicable, at the appropriate time.

Candidate's Name (typed or printed)

Chair's Name (typed or printed)

Candidate's Signature

Chair's Signature

The scholar's local mentor will be: _____

Local mentor's phone number: _____

Local mentor's e-mail address: _____