

EMPLOYER'S COMMITMENT

INDIANA AGRICULTURAL LEADERSHIP PROGRAM

AUTHORIZATION STATEMENT FROM EMPLOYER OF CANDIDATE

This commitment must be received in the AgrInstitute office postmarked no later than January 19, 2024 (electronic submission acceptable/preferred, beth@agriinstitute.org).

Investment in leadership training cannot be done by a few people; many people must become involved. Your employee has indicated interest in the Indiana Agricultural Leadership Program, which would involve commitment to the following schedule. As his/her employer, we ask that you make a commitment to support this individual. Participants of our program are required to attend **100%** of **ALL seminars**. Therefore, it will be necessary for this candidate, if selected, to be away from his/her position to attend. **Your commitment is a significant contribution to this program.** The dates of the seminars are:

Seminar 1	July 11-13, 2024	Seminar 7	July 10-12, 2025
Seminar 2	September 5-7, 2024	Seminar 8	September 4-6, 2025
Seminar 3	December 5-7, 2024	Seminar 9	December.4-6, 2025
Seminar 4	January 9-11, 2025	Seminar 10	January 8-10, 2026
Seminar 5	February16-22, 2025	Seminar 11	February. 15-28, 2026
Seminar 6	April 3-5, 2025	Seminar 12	April 9-11, 2026

YES, I understand _____ will be away from my
(Applicant's name)

company for twelve seminars during the dates indicated above.

YES, he/she has my authorization to participate in the Indiana Agricultural Leadership Program.

Employer's Signature _____

Employer's Name _____

Title/Company _____

Business Address _____

Phone _____

Email _____