

San Francisco State University
Ed.D. in Educational Leadership
Employer Support Agreement

Form C

The person listed below has applied to the SFSU doctoral program in Educational Leadership. The candidate's success in the program may require release time, mentoring or support from the school district or employer. The program is designed to be completed in three years attending alternate weekends during fall and spring semesters and attending two, one-week sessions during the summer. The applicant has given your name as a recommender.

| APPLICANT COMPLETES THIS SECTION | | |
|---|---|--------------|
| APPLICATION FOR FALL : _____ | | |
| APPLICANT NAME: | <input type="checkbox"/> P-12 Educational Leadership <input type="checkbox"/> Community College Leadership | |
| EMPLOYER/DISTRICT NAME : | LENGTH OF EMPLOYMENT : | |
| EMPLOYER COMPLETES THIS SECTION | | |
| Your employee identified above has applied to the Ed.D. in Educational Leadership program at SF State University. Based on your knowledge of the candidate's leadership potential and intellectual capacity, please provide your recommendation regarding admission of this applicant to the doctoral program. | | |
| Admission to the Ed.D. Program is: <input type="checkbox"/> Highly recommended <input type="checkbox"/> Recommended <input type="checkbox"/> Recommended with reservations (comment): <input type="checkbox"/> Not recommended | | |
| If you have additional information, you may provide any comments regarding the capacity of this application to complete a doctorate program on a separate page attached to this form. If you have questions, you may contact one of the program directors at edd@sfsu.edu . | | |
| DISTRICT SUPPORT AGREEMENT | | |
| <input type="checkbox"/> We will assure that the employee can leave her/his work site in time for classes. <input type="checkbox"/> The employee will be supported in conducting approved applied dissertation research in our organization/district. <input type="checkbox"/> We will assign a district mentor who has a doctoral degree, preferably a current or former district employee. <input type="checkbox"/> We will explore other ways to support the applicant through the use of employee development funds (e.g. book scholarships, conference fees, travel, etc.) <input type="checkbox"/> Other: | | |
| NAME OF SUPERINTENDENT OR DESIGNEE | SIGNATURE | DATE |
| TITLE | EMAIL ADDRESS | PHONE |