

# Intensive Learning Program

## Confirmation of Institutional Support Form

*This form should be completed by the executive leader and submitted via email to Mira Swearer at [mira@arl.org](mailto:mira@arl.org)—either directly from the executive leader or with the executive leader cc'd.*

### Executive Leader Information

Name:

Email address:

Title:

Institution:

Are you at an ARL Member Institution?

Yes

No

If yes, are you the ARL Member Representative?

Yes

No

### Senior Leader Information

Applicant name:

Applicant title:

Does the applicant report to you?

Yes

No

If no, please describe their [eligibility for the program](#):

### Institutional Support

If the applicant is accepted to participate in the Intensive Learning Program, I commit to supporting the applicant through: time release for all [program components](#), and financial and coverage of expenses for attendance at the in-person ARL Fall Association Meeting and in-person education and community session; and the ARL Learning Summit, including travel, lodging, meals, and incidentals.

Yes

No

Signature:

Date: