

Application Form Part II: Employer's Statement of Support



To be completed, signed and stamped by the applicant's supervisor/superior.

1	Name of applicant		
2	Institution		
3	Your name		
4	Your position		
5	Your professional relationship with the applicant		
6	Your contact details for correspondence	Telephone incl. dialing code:	Email:
7	Type of institution (sector)		
8	What are the main activities of your institution?		
9	<p>To enable my institution to benefit from this programme, the applicant will continue to be employed in my institution following their completion of the BMZ African-German Academy 2023</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No, because <input type="checkbox"/> Not sure yet, because </p>		

10	We are interested in finding out to what extent the applicant's participation in the BMZ African-German Leadership Academy will contribute to their professional development and to the strategic organizational development of your institution. Please answer the following questions:
a	What do you expect from the applicant's participation in the BMZ African-German Leadership Academy? Where and how do you see applicant's participation contributing to institutional development? (approx. 500 words)
b	Why is participation in a network on sustainability between German and African institutions interesting for your institution? (approx. 300 words)

Declaration by the employer:

- ▶ I hereby confirm my support for the application of _____
to participate in the BMZ African-German Leadership Academy 2023.
- ▶ I commit to facilitating the transfer of their newly-acquired skills and competencies into the work
of my institution.
- ▶ I confirm that I have read, understood and accept the conditions for participation.

Date

Place

Signature