

Supervisor Development Institute

Application

To participate in the *Institute* and receive a certificate of completion:

- Submit a completed application form from the System Office of Human Resources, ([click here](#)) available, signed by both you and your supervisor, indicating approval
- Attend approximately 32 hours of training within a one-year period.
- Participate in ongoing reinforcement activities.

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System Office Supervisor Development Institute

Application Form

Please complete and return to:
Office of Human Resources
16 Central Street
Bangor, ME 04401
FAX: 973-3209

Name: _____

Current title: _____ Department: _____

UMS address: _____

Email: _____ Phone extension: _____

Date you became a UMS supervisor: _____

Name(s) of employee(s) you supervise: _____

Supervisory experience (please list positions both with and outside of UMS, including dates):

What are your goals in participating in the *Institute*?

If this employee is accepted into the Institute, we understand that the employee will be making a commitment to attend 12 Institute modules, which will be held approximately every 3-4 weeks.

Signature: _____ Date of application: _____

Supervisor's signature: _____ Date: _____

Supervisor's printed name: _____

The Supervisor Development Institute defines a supervisor as someone who:

- oversees the day-to-day work of another regular employee
- is responsible for annual performance assessment of one or more employees
- is responsible for disciplinary or recommendations concerning one or more employees performance

Questions? Please contact Sally Dobres, 973-3372