



**NCSEA U Class of 2024  
Supervisor Approval/Support Form**



Name of NCSEA U Applicant:

Name of Supervisor/Manager:

Supervisor/Manager's Email Address:

Supervisor/Manager's Phone Number:

This applicant has my acknowledgement and support, as supervisor/manager, as well as the organization's IV-D Director/Agency Director.

The applicant's travel permission has been approved

The applicant's travel permission is pending and will be determined by

Signature of Supervisor/Manager: \_\_\_\_\_

Date: