**AGREEMENT OF RESPONSIBILITIES – EMPLOYEE**

I understand that if I am selected for participation in the GHC Leadership Development Institute, I must be willing to make the commitments identified in the announcement and to carry out developmental activities identified in the program outline. I also understand that I will be released from the program if I do not make satisfactory progress or fail to take full advantage of the developmental activities.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**AGREEMENT OF RESPONSIBILITIES – MANAGER**

I understand that if the above employee is selected for participation in the GHC Leadership Development Institute, I must be willing to make the commitments identified in the announcement and to support the employee throughout the GHC Leadership Development Institute program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Signature Date