

PAAA Student Development Award

Part C: Verification by Host Faculty Member

I verify that

1. I have been contacted by the student _____

or student's supervisor _____

to discuss a visiting arrangement for the purposes of student development.

2. I agree to participate in the visiting arrangement and make available personnel
and/or resources as necessary and pre-arranged.

3. I agree to the arranged dates of _____

(or to be arranged later _____) to be a convenient time for the visit.

Signature _____ Date _____

Name _____

Address _____

Phone _____

Email _____

Please send to the PAAA President by April 1