

SAPST BIPOC Mentee Letter of Support

Date:

Re: _____ [name of applicant/mentee]

Dear ...

As _____'s [name of applicant] employer/supervisor, I fully support their application to the **BIPOC SAPST MENTEE Training Series**

I am aware that if the Applicant is admitted into the **BIPOC SAPST MENTEE Training Series** that they will be required to:

- 1) Attend and participate in all bi- weekly virtual training events. The dates of the events are:
 - A. **Bi- Weekly Tuesday April 5- June 20, 2022 1:00- 5:00 P.M.**
 - B. **Bi- Weekly Wednesday Learning Community Sessions April 5- June 15, 2022 (1:00-3:00)**
- 2) Meet (by phone, Zoom, in-person, etc.) with assigned Mentor at least four times throughout the training series
- 3) Complete the final project

As _____'s supervisor, I acknowledge that participation in this program requires a significant amount of their time and effort during 6-8 hours throughout the workweek; however, I am committed to advancing their professional development in this field, as well as the goal of enhancing the diversity of the behavioral workforce in Wisconsin.

If there are any concerns or questions regarding participation or the Institute at any time, please feel free to contact, Liz Adams at Elizabeth.Adams@dhs.wisconsin.gov.

In full support,

Signature