



CU AT THE TOP



SUPERVISOR

CU at the Top Supervisor Achievement Form

This form indicates that the employee below has completed the CU at the Top personal and professional development program.

Employee Name:

Employee ID:

Department:

Title:

As a closing activity to your employee's participation in the CU at the Top program, please provide a brief summary – good or bad – on the value this program has brought to your employee over the course of this year. Feel free to comment on how this program supported your employee noting any enhanced skills, progress towards goals and objectives, and observations where the knowledge could be applied.

Supervisor Signature

Date

Please submit to systemhr@cu.edu.