



DEADLINE FOR SIGNATURE: February 16, 2024

LEADERSHIP DEVELOPMENT PROGRAM

MAY 6 TO 9, 2024

SIGNATURE FORM

INSTRUCTIONS: Please fill out this form, sign and obtain a signature from your Chair or Director, and send it to the address listed below or by e-mail to facdev-events.med@mcgill.ca.

Dr. Mr. Mrs. Ms.	Last Name	First Name
DEPARTMENT / DIVISION:		
PROGRAM: Leadership Development Program – May 6th to May 9th, 2024		
Please provide a personal cheque of \$350 (made payable to McGill University) or a Fund number (which can be provided by your department) with your application: Personal cheque (post dated April 8, 2024) Fund: (6 digits)		
* Course deposit: \$350. Applicants are expected to attend the full 3.5-day Program. The deposit will be returned upon completion of the full program.		
**Cancellation fee: Cancellations received in writing before April 8th, 2024 will result in a complete refund of the deposit of \$350. Refunds for cancellation requests received after this date and no shows will not be possible.		
I will participate in the <u>full</u> 3.5-day <i>Leadership Development Program</i>.		
Applicant Name:		
Applicant Signature:		Date:
I agree to support the above applicant with the time necessary to complete the 3.5-day <i>Leadership Development Program</i>.		
Chair / Director Name:		
Signature:		Date:

Please return to: Faculty Development Office

Faculty of Medicine & Health Sciences, McGill University, Lady Meredith House,

1110 Pine Ave West, #103, Montreal, QC H3A 1A3

Tel: (514) 398-2698, Fax: (514) 398-6649, Email: facdev-events.med@mcgill.ca

Website: www.mcgill.ca/medicinesfacdev