

KU Leadership Engagement Certificate

Documentation of Leadership Activities Form

Complete this form to verify your leadership activities for the Leadership Engagement Certificate. Verification is required if you did not complete a leadership experience for KU class credit.

To provide documentation for leadership experience please submit ONE of the following:

1. Preferred method: A signed Documentation of Leadership Activities Form (next page this document) from a KU faculty, staff member, or advisor that can attest to your leadership experiences. The completed verification form should be scanned and uploaded to your certificate record in myKU portal.

OR

2. Alternate method: A KU faculty, staff member, or advisor that can attest to your leadership experiences may send us verification directly by e-mailing leadershipstudies@ku.edu. This e-mail must come directly from the supervisor and not the student.

The e-mail from the person providing verification should include:

- Student participant first and last name
- The nature of the leadership activities and/or project
- The number of hours completed during the experience

Students still need to enter your leadership activity hours on your certificate record in myKU Portal.

Documentation must be submitted no later than the last day of final exams to receive the certificate in a given semester.

Leadership Engagement Certificate Contact Information

Institute for Leadership Studies

Malott Hall, Room 2010

1251 Wescoe Hall Drive

Lawrence, KS 66045

Phone: 785-864-8207

<https://ils.cms-dev.ku.edu/leadership-engagement-certificate>

Leadership Engagement Verification Form

Part I: To be completed by the student

Student First and Last Name:

Date

KU Student ID Number

KU Email address

Brief summary of leadership activities, experiences, and responsibilities

Leadership Engagement Verification Form (Cont.)

Part II: To be completed by KU faculty, staff member, or advisor that can attest to your leadership experiences.

First and Last Name

Title

Email Address

Phone Number

KU Organization/Department

Number of Leadership Activity Hours Completed by Student:

Please comment briefly on this student’s performance, responsibilities, and involvement in the reported leadership activity. Attach additional page(s) as necessary.

Additional space for comments:

Supervisor Signature

Date