

# CONTRACT OF ENROLLMENT

## For employee participation in the Duke University Financial Certification Program administered by Financial Services

### Certification Pursued: **SAMPLE DOCUMENT**

I have read and fully understand the Supervisor Expectations for participation in the SAMPLE curriculum of the Financial Certification Program as detailed in the Policy document. As a supervisor, I resolve to support my employee's dedication to the successful and timely completion of this certification. I attest to the fact that my employee meets the eligibility requirements of the FCP:

- ☐ Is a full time employee
- ☐ Has successfully completed Duke's 90 day orientation and evaluation period
- ☐ Has relevant professional responsibilities at Duke

In addition, I fully understand the implications of and accept the \$100.00 per class Failure to Attend Charge.

Supervisor \_\_\_\_\_ date \_\_\_\_\_

I have read and fully understand the Participant Expectations for acceptance and participation in the SAMPLE Curriculum of the Financial Certification Program as detailed in the Policy document. As a participant, I accept the rigors of the program and resolve to successfully complete the coursework and testing included in this curriculum in the allotted timeframe. I also fully understand and accept the implications of the \$100.00 per class Failure to Attend Charge.

Employee \_\_\_\_\_ date \_\_\_\_\_

With questions please call:

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