

**Concordia Doctor of Education Application**  
**Employer Support Form**

As the supervisor/employer of \_\_\_\_\_, I am aware he/she is applying to the Concordia University Texas Doctor of Education program. I support this individual in pursuit of his/her degree and understand the following:

- I understand this is a demanding, terminal degree program and I will support this person during pursuit of the degree.
- This individual will conduct field work in our organization to complete his/her research and practicum.
- The program is a minimum of three years to complete.

Student name: \_\_\_\_\_

Company/School name \_\_\_\_\_

Employer/Supervisor name: \_\_\_\_\_

Employer/Supervisor signature \_\_\_\_\_

Date \_\_\_\_\_