



**Take Your Child to Work Day Supervisor Approval for Participation**

This form must be completed prior to registering your child for the event.

I, \_\_\_\_\_, supervisor of \_\_\_\_\_, have discussed the employee's schedule and commitments to the department and approve their participation in Take Your Child to Work Day activities on Thursday, April 25, 2024. I understand that the employee will be attending the various Take Your Child to Work Day events across campus with their child(ren) throughout the day and that they will not be in the office/department.

\_\_\_\_\_

Signature of Supervisor

Date