Master's in Public Education Management

Organization & Supervisor Acknowledgement Form



Program Eligibility

Designed for working professionals, the Master's in Public Education Management program aims to support students in increasing their impact in their current roles and accelerating their future leadership trajectories. A rich, discussion-based learning environment draws upon the real-time experience of all students in the cohort. The program therefore requires that students be fully employed for the duration of the program. To learn more about the benefits of the Master's program for organizations, please visit our website.

The Broad Center at Yale SOM closely examines the current positions held by applicants to assess alignment with the program and with the Center's mission. The Broad Center at Yale SOM reserves the right to revisit eligibility and mission alignment at any point until successful program completion including, but not limited to, at times of transition such as changes in job responsibilities or employment status. As any change in employment may impact continued eligibility for the program, we expect students to notify The Broad Center at Yale SOM in advance of making any such changes.

Program Calendar

The program calendar spans fourteen (14) months from July 2025 through September 2026 and consists of five (5) weeks of Monday-Friday, in-person class sessions held on the Yale School of Management campus in New Haven, Connecticut. Students are also required to attend a virtual program orientation in June 2025 and ten (10) day-long virtual sessions once per month between in-person residence weeks to continue class sessions and program elements.

Virtual Orientation: May 29, 2025 Residence 1: July 14-18, 2025 Residence 2: October 20-24, 2025 Residence 3: February 23-27, 2026 Residence 4: June 1-5, 2026 Residence 5: August 3-7, 2026 Virtual Sessions: Monthly, day-long virtual sessions (exact dates to be shared with students at a later date)

Time Commitment

The Broad Center at Yale SOM requires this Organization & Supervisor Acknowledgement Form to be completed by 1) a direct supervisor and 2) an organization representative granting time out of the office on required class days and sufficient flexibility to complete the required coursework.

Additionally, applicants must pledge that they will be able to attend all required class days and have sufficient flexibility to complete the required coursework. Students will not be excused for absences that are due to work commitments, nor will they be granted extensions on assignments for work-related reasons.

Required Signatures

Applicants must review and sign below and collect the required signatures from their direct supervisor and an organizational representative who has the authority to grant release time on class days. After receiving **all**

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signatures on this form, applicants should scan and upload the completed form through the online application. Submit only one completed form. A completed copy, including all four pages of this form, must be submitted before the application deadline.

Applicant Acknowledgement

I pledge that I will remain employed at a full-time capacity throughout the program. I will also attend all required classes, participate fully in programming, and I will have enough flexibility in my work to complete all required assignments.

Please write your full legal name: _____

Please place your signature here:

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Supervisor Form

Please note, both the applicant's supervisor and the individual in the applicant's employing organization who has the authority to grant release time on class days must fill out this form.

Please note that it is the applicant's responsibility to ensure that their employer completes this form.

Supervisor Contact Information

Supervisor First and Last Name:	
1	

Organization: _____

Relationship to Applicant:	
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Email: _____

Phone: ______

Ap	olicant First and Last Name:	

Supervisor Acknowledgement

The applicant above has applied to the Master's in Public Education Management program at The Broad Center at the Yale School of Management and is seeking your approval for time away from the office if accepted and enrolled in the program. Please read the instructions below and sign if appropriate.

My signature below confirms my support for the applicant's participation in the Master's in Public Education Management program. By signing this form, I am confirming that I understand the time demands of Master's degree study, and that the applicant must attend all in-person and virtual program sessions, and needs sufficient scheduling flexibility to complete the required coursework.

Supervisor Signature: _____

Additional Comments (optional):



Organization Representative Form

Please note, both the applicant's supervisor and the individual in the applicant's employing organization who has the authority to grant release time on class days must fill out this form.

Please note that it is the applicant's responsibility to ensure that their employer completes this form.

Organization Representative Contact Information
Organization Representative First and Last Name: ________
Title: _______
Organization: _______
Organization: _______
Relationship to Applicant: _______
Email: ______
Phone: ______
Applicant First and Last Name: ______

Organization Representative Acknowledgement

The applicant above has applied to the Master's in Public Education Management program at The Broad Center at the Yale School of Management and is seeking your approval for time away from the office if accepted and enrolled in the program. Please read the instructions below and sign if appropriate.

My signature below confirms support from my organization for the applicant's participation in the Master's in Public Education Management program. By signing this form, I am confirming on behalf of my organization that the organization understands the time demands of Master's degree study, and that the applicant must attend all in-person and virtual program sessions, and needs sufficient scheduling flexibility to complete the required coursework.

Organization Representative Signature:

Additional Comments (optional):