

EXHIBIT K-1:

APPROVAL DECISION LETTER

PDP Portfolio Review Date: _____

EMPLOYEE INFORMATION

Name: _____ Employee ID: _____

Credentials: _____ Department Name: _____

	<u>LEVEL</u>	<u>CORES</u>	<u>ELECTIVE POINTS</u>	<u>MONETARY AWARD</u>
<input type="checkbox"/>	Bronze	_____	_____	\$1,500.00
<input type="checkbox"/>	Silver	_____	_____	\$2,500.00
<input type="checkbox"/>	Gold	_____	_____	\$3,000.00
<input type="checkbox"/>	Diamond	_____	_____	\$3,500.00

I hereby acknowledge that the above employee has met the criteria set forth by the Professional Development Program and verified by the PDP Committee.

Signature PDP Chair/Co-chair

Contact Number

Date