

October 3, 2022

Dear Willard Brewster

Each of the four Senior Leaders in UH Facilities/Construction Management were asked to nominate staff members who they thought should be invited to participate in the Facilities Leadership Education and Development (L.E.A.D.) Program.

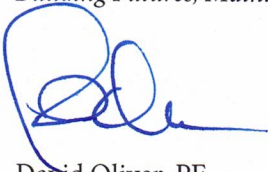
You have been nominated and are now being invited to participate in the L.E.A.D. Program. This is an opportunity for you to better understand your leadership techniques, learn about communications skills and develop your management styles. This is not a compulsory program but is being given as an opportunity to learn even more about yourself. You have been invited to participate in the following.

360 Degree Assessment: A comprehensive 360 degree assessment will be facilitated for each individual to understand how they are perceived among their colleagues. This assessment is completed by those supervising the staff members, those who work alongside the staff member and those who work for that staff member which gives the participant a 360 degree perspective.

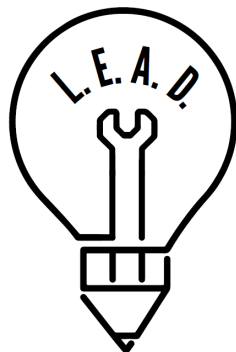
Please indicate on the acknowledgement form if you are willing to participate and return this form to the Sr AVC/ACP Office in Room 122 (GSB).

I look forward to building our Facilities leadership team and I am enthusiastic about this new adventure.

Building Futures, Maintaining Excellence.



David Oliver, PE



Facilities

Leadership Education,
& Development Program

Participation Acknowledgement

Please indicate on the acknowledgement form with your initials, your interest level and return this form to the Sr AVC/AVP Office.

_____ Yes, I, Willard Brewster would like to participate in the following programs of Facilities LEAD Program. I understand the commitment I am making and will do my part to fully engage in the activity. I realize this is not compulsory and is an opportunity for personal growth.

360 Degree Assessment

_____ No, I, Willard Brewster would not like to participate in Facilities LEAD Program.

Participant Name: Willard Brewster

Participant Signature: _____ Date: _____