



STAFF DREAM FUND

STATEMENT OF SUPPORT – ODU COLLEAGUE

Name of Applicant: _____ Phone: _____

Your name: _____ Phone: _____

How long have you known this employee: _____

In what capacity? _____

Describe how this employee supports the University's mission, vision, values and goals.

Describe the value of this employee's impact on the ODU campus community and their community service outside. Include any committees or specific activities this employee has participated in.

Has this employee described/discussed their dream with you? If so, what have they shared with you about their dream?

How might the realization of this employee's dream impact this employee and the work in their unit afterwards?

Briefly explain how this employee's growth aligns with ODU's strategic plan of being forward focused.