



LOANED EXECUTIVE COMMITMENT FORM

Please return by April 15, 2024

Being a Loaned Executive is vital to the success of the Greater Longview United Way Annual Campaign. Thank you for considering being part of this vital program. A decision will be made regarding the 24/25 Loaned Executive Class by April 15, 2024.

PLEASE READ CAREFULLY: I have marked my calendar and am available to attend the majority of the events detailed in the Loaned Executive Description Document¹, including the mandatory training on May 20, 2024. I understand that I will also be responsible for facilitating/working with my company's campaign as well as other GLUW campaign accounts assigned to me in addition to the scheduled events.

Company Information:

Company Name _____

CEO/Manager/Supervisor's Name _____

Address _____

Phone _____ Email _____

Loaned Executive Information:

Name _____

Position/Title _____

Phone _____ Email _____

Please submit form to:

Dr. Evan Dolive, Executive Director
Greater Longview United Way
Phone 903.758.0191 edolive@longviewunitedway.org

¹ Found at longviewunitedway.org/le



COMPANY/FIRM COMMITMENT FORM

Please return by April 15, 2024

Please review the information and time commitment outlined in the Loaned Executive Description with your supervisor and have them sign below to ensure all parties involved understand the expectations of those participating in the Loaned Executive program.

To be completed by the Supervisor of the Loaned Executive Applicant

As a sponsoring company, you agree to support your employee as they fulfill their duties as a Loaned Executive. Greater Longview United Way understands the importance of your employee's time and the impact they have in the success of your business.

For that reason, time away from your company for meetings and/or events is carefully considered throughout the program.

I have reviewed the 2024 Loaned Executive Calendar printed in the Loaned Executive Description and agree to support my company's candidate in the program.

Loaned Executive Name: _____

Company Name: _____

Supervisor Name: _____

Supervisor's Signature: _____

Date: _____