**[INSERT ON UNIVERSITY LETTERHEAD]**

**This form must be submitted on University letterhead by the academic or administrative heads of the institution. These are commonly referred to as Dean, Provost, Chancellor, Vice Chancellor, President, Rector, or Principal of the institution. Electronic signatures are permitted.**

**Complete this section for proposed sequences:**

I, Your Name, am an administrative or academic head of the institution. I hereby attest that the proposed Verified Course Sequence (VCS) Coordinator Name, has full-time faculty status at our institution, Institution Name, and is authorized by this institution to make academic decisions, including payment of application fees (beginning in 2020), on behalf of the proposed course sequence and its students and instructors.

By signing, I hereby agree to notify the Association for Behavior Analysis International (ABAI) VCS (or have the department chair do so) at VCS@ABAInternational.org within 30 days if the proposed VCS Coordinator, Name, no longer holds full-time faculty status at the institution.

Signature Date

Title Institution