



**Letter of Recommendation**

Member's Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**For UFCW Local Official to Complete:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position: \_\_\_\_\_

Is your local a currently an OUTreach sponsor?  Yes  No

Will this member be taking vacation from work or receive lost time?

\_\_\_\_\_

Why do you recommend this member to attend the Creating Change Conference with UFCW OUTreach?

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If you have any questions regarding this, please contact Michele Kessler at 610-513-9927 or Kim Frost at 516-639-4470