SIGNED STATEMENT ATTESTING TO PROCEDURAL SAFEGUARDS  
(Part 2)

I CERTIFY THAT:

I was informed of the following addition/deletion/correction made to the file.

______________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

______________________________________________________________

Print Name

_________________________________

Signature

_________________________________

Date

If the above changes resulted in a new department letter or an addendum, then:

C. Under APM 220-80-e
   1. I received a copy of the department letter on _____.
   2. I was informed of the right to make written comments on the departmental recommendation within five business days of receiving it and to direct transmittal of these comments to the Chair, the Dean, or the VPAP as described in Section II.A.9.b of the Call. I have chosen to:
      __ respond in writing to the departmental recommendation within 5 business days (use Attachment H)
      __ not respond to the departmental recommendation and waive the 5 day waiting period.