



### Faculty Sponsor Form

#### Faculty Sponsor Information

Last Name	First Name	Middle Initial
Preferred Email Address		Phone Number
School/College	Department/Program	

#### Title of Submission

#### Student(s) Name

By completing and signing this form, I affirm that:

- I have reviewed the submission on its content, method, grammar and overall presentation.
- I assert that the submission has adhered to institutional, departmental, and disciplinary ethical standards.
- I confirm that the submission submitted observes Alpenglow's submission guidelines and recognize this work as original.
- I willingly sponsor this work and believe that it is suitable for publication.
- I agree that if this submission is selected for publication, I will work with the student author to make recommended revisions, if applicable.

\_\_\_\_\_  
Faculty Sponsor Signature

\_\_\_\_\_  
Date