

## Training on Monitoring and Evaluating Return and Reintegration Programmes

### Supervisor's Agreement

**Name and Surname :**

**Position:**

I hereby support and approve \_\_\_\_\_ application to join the training on Monitoring and Evaluating Return and Reintegration Programmes and agree to ensure that he/she will be given enough time to carry out the training-related work and assignments between the 19<sup>th</sup> of September 2022 and 27<sup>th</sup> of October 2022 (see call for interest and ToRs).

**Place, date and signature**