



PAEA Student Member at Large (SMAL)
Program Director Certification

I certify that _____ is a student* in good standing and is currently an enrolled student (didactic or clinical). I support their application to the PAEA Student Member at Large position and understand the requirements of and commitment to this position by the student.

Director's Name

Signature

Program Name

Date

***Eligibility:** Individual must be a full-time student in good academic and professional standing in a PAEA member program.