

## ACKNOWLEDGEMENT OF PROBATIONARY STATUS

### Stone Mountain Main Street

Main Street Manager's Supervisor Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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### MAIN STREET BOARD OF DIRECTORS

Board Chair Name: \_\_\_\_\_

Board Chair Signature: \_\_\_\_\_

Date Term Expires: \_\_\_\_\_ Date of Acknowledgement: \_\_\_\_\_

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### MAIN STREET DIRECTOR

Manager Name: \_\_\_\_\_

Manager Signature: \_\_\_\_\_

Hire Date: \_\_\_\_\_ Date of Acknowledgement: \_\_\_\_\_

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### GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS

### OFFICE OF DOWNTOWN DEVELOPMENT - GEORGIA MAIN STREET PROGRAM

ODD Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

Jessica Worthington, Director