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| **In-person trainings or webinars:** At a minimum, 25 business days advance notice is optimal to ensure we locate a trainer with experience in your course topic.  |

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| **Requestor**  | Name:  |       | Title:  |        |
| Email:  |        | Ph:  |         | Alt Ph.:  |        |

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| **Training** **Location \***  | Address: :  |       |
| Specific Floor/Room/Cafeteria: |       |
| City:  |         | State:  |     | Zip Code:  |        |

 **\* Address required for webinars and in-person trainings.**

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| **Site Contact** **at location** | Name:  |       | Title:  |        |
| Email:  |        | Ph::  |         | Alt Ph.::  |        |
| Materials for trainings are sent to requestor and site contact via email with instructions prior to the training.  |

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| **Date Requested** |  | **Start Time** |       | **End Time** |       | **Time Zone**: |  |
| **Training Title**  |       | **# of Participants** |       |
| **Alternate Date/Time** |  |

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| **Dress Code:**  |  | **Training Type:**  |  |
| **Note: Webinars are presented via Adobe Connect unless otherwise specified** |
| **Will two weeks be sufficient for trainer confirmation** |  If ‘NO’- time frame needed:  |       |
| **Specific trainer requested**  |  | If Yes, provide name: |       |

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| **Audience type**  |   | Other:  |       |
| **What are their responsibilities/duties** |       |
| **Is something going on that led you to this request**  |        |
| **Training style that works best for this group** |  | Other |       |

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| **Would you like to use :**  |  [ ] EAP Overview Flyer [ ] Participant Evaluations |

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| **Additional information concerning this training:** |       |