



- Instructions:**
1. Please print using blue or black ink pen.
 2. Submit completed form to Organizational Development & Training, Building UPD, 0046.
 3. Supervisors: If the same training event was attended by more than one employee, complete only Training Information, and attach a list of employees who attended the training including name and Employee ID for each employee.

The training information provided on this form will be added to the employee's personal training transcript to maintain an accurate training history.

PERSONAL INFORMATION		
Name:	Employee ID:	Extension:
Title:	Department Name:	Extended Zip:

TRAINING INFORMATION	
Type of Training: (select one only)	<input type="checkbox"/> Conference <input type="checkbox"/> Seminar <input type="checkbox"/> Workshop <input type="checkbox"/> Lecture <input type="checkbox"/> Self-Paced Training <input type="checkbox"/> Other: _____
Name of Training Event:	
Short Description of Training Content:	
Name of Organization Sponsoring Event:	
Start Date:	End Date:
Start Time:	End Time:
Cost of Training Event: (per person, ex: registration, books)	
Location of Training Event: <input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus Location: _____	
Approving Supervisor/Manager Signature	Date