



1 Training Request

Name	Position	Department

2 Training Information

Information	Complete Entry
Course Title:	
Training Objectives:	
Relevance to Role/Responsibilities:	
Benefits to Staff Member:	
Review by Training Coordinator:	

3 Provider/Course Details

Type:	<input type="checkbox"/> Internal	<input type="checkbox"/> External
Trainer/Provider:		
Course Date:		Course Location:
Duration	From:	To:



4 Training Costs

Training Cost Item	Details	Cost Code	Cost \$
Course Fees (Note: Non-attendance without the requisite notification may still involve costs being incurred on behalf of the non-attendee.)			
Accommodations			
Travel			
Other			
Total Cost \$			

5 Authorization

Name	Position	Date	Electronic Signature