

Training Request Form



TRAINING REQUESTOR

Name:

Job Title:

Division:

Contact Info:

ONLINE INSTRUCTOR-LED

Course Subject and Description of content:

What is the **timeline** for this course? *How long is course and when do you need it completed?*

Course Audience: *Who would be taking the course?* **Classes that are mandatory require Executive approval.**

What is the training objective? What do you want to accomplish?

Do you have Knowledge Check(s) and or Quiz questions for this training? Please attach.

Do you have the course content, or will we need to create it for you? Please attach.

**If this course requires additional resources such as books or software, the department will be responsible for covering the cost of, or reimbursing TP&E for those resources.*

Please email form to: TCLearningandDevelopment@traviscountytx.gov