

Training Request Form

TRAINING REQUESTOR

Name:
Job Title:
Department:
Contact Info:

COURSE & BACKGROUND INFORMATION:

Course Subject:
Course Description:
Course Audience:
What is the training problem?
What is the impact on the company?
Have you taken any other actions to improve job performance?

What tasks will the proposed training cover?

What productivity improvements do you expect from the proposed training?

How can those productivity improvements be measured?