

TRAINING REQUEST FORM
TRAINING NEEDS
Oklahoma NRCS Technical Courses

EMPLOYEE NAME: _____

EMPLOYEE TITLE: _____

EMPLOYEE LOCATION: _____

ICAMS ID: _____

OK-GIS-001

Course Number

Advanced ArcGIS with Customer Service Toolkit

Course Title

Instructions:

Employee should print out this page.

- Fill in Name, Title, Location, and ICAMS ID (this data may be entered prior to printing.)
- Please list only one course per form
- Sign and send to immediate supervisor for approval and forwarding to the Appropriate SLT Member.

Employee Signature

Date

Supervisor Signature

Date

Supervisor's Title

State Leadership Team Member Signature

Date

SLT Member's Title

After all signatures are secured, forward a hard copy to the Toolkit Coordinator, Suzanne Collier, Resource Conservationist, NRCS State Office, Stillwater, Oklahoma.