IDENTIFIED TRAINING NEEDS OUTSIDE CORE CURRICULUM

**Description of need:** (one training need per page)

**Description of conditions that created training need:**

**Suggested method of meeting need:** (formal training, etc.)

Employee Name: ____________________________

Total Costs Other Than Travel (registration, books, etc.) ____________________________

Total Travel Cost: ____________________________
(Include all travel cost – authorization fee, hotel, plane, etc.)

Requested By: ____________________________ Date: ____________________________

Employee

Recommended By: ____________________________ Date: ____________________________

Supervisor

Approved By: ____________________________ Date: ____________________________

Leadership Team Member

Approved By: ____________________________ Date: ____________________________

ASTC(M&S)/Training Officer

Please provide a signed copy of this form to the Training Officer.