**Control No.**

**Date:**

**TRAINING REQUEST FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **I. CONTACT INFORMATION** | | | | | | | | | | | |
| Name: | | | | | | | Position: | | | | |
| Department: | | | | | | | Contact Number: | | | | |
| **II. COURSE INFORMATION** | | | | | | | | | | | |
| Title of Training/Course: | | | | | | | | | | | |
| Face-to-face Training Online Training (e.g. Webinar, Virtual learning, etc.) | | | | | | | | | | | |
| Date: | | | | | | Time: | | | | | |
| Offered by: | | | | | | Venue (if face-to-face): | | | | | |
| Presenter/s: | | | | | | Target No. of Participants (if applicable): | | | | | |
| Platform to be used (if online): | | | | | | | | | | | |
| Brief Summary of Course Content: | | | | | | | | | | | |
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|  | | | | | | | | | | | |
| **III. PURPOSE OF TRAINING** | | | | | | | | | | | |
| Objective/s: | | | | | | | | | | | |
|  | To meet current job requirements or duties. | | | | | | | | | | |
|  | To meet future Department/Office requirements or duties. | | | | | | | | | | |
|  | To meet competency in operating new technologies, procedures, or systems. | | | | | | | | | | |
|  | To meet employee career opportunities. | | | | | | | | | | |
|  | Others: | | | | | | | | | | |
|  |  | | | | | | | | | | |
| **IV. FUNDS AVAILABILITY** | | | | | | | | | | | |
|  | Funded (please indicate amount) | | | | | | | | | | |
| Not funded (please indicate amount)  Not applicable\*  *\*Please skip Budget approval and proceed to VP approval* | | | | | | | | | | | |
| V. **LINE ITEM BUDGET** | | | | | | | | | | | |
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| **VI. ATTACHMENTS** (may tick more than one) | | | | | | | | | | | |
|  | Invitation Letter | |  | Publication | | Others: | | | | | |
|  | Endorsement Form | |  | TNA Result | |  | |  | | | |
| **REQUESTED BY:** | |  |  |  |  |  | |  |  |  |  |
| Director/Office Head/Dean: | | | | | | | | |  |  | |
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| **RECOMMENDING APPROVAL:** | | | |  |  |  | |  |  |  |  |
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|  |  |  |  |  |  |  | |  |  |  |  |
| HRDMO Director Finance Office Director | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Vice President (AF/AA/RES/PQA) | | | | | | | | | | | |
| **APPROVED:** | | | | | | | | | | | |
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|  | | | | | | | |  | | | |
| University President | | | | | | | | | | | |