

Request to Create Blue Collar Funded Event in the Delaware Learning Center (DLC) Division: Date

Agency/Department:	Division:	Date:
Agency Contact Person:	Email:	Telephone:
 A form is required for each event Complete all required fields to pr Submit to: statewide_training@d 	event delay,	LC,
Was this training topic funded previously?	If Yes, how was this training listed in the DLC?	
Event Name or Title to be used within	n the DLC:	Training Hours:
Agency Training Coordinator:	Email:	Telephone:
Organization or Vendor Providing Tr	raining:	•
Name of Trainer:	Email:	Telephone:
Availability to Which Employees:		
Training Event Description:		



Training Objectives:		
Class Size:	Minimum:	Maximum:
Will this training be multiple days?	If Yes, how many days?	Total Number of training hours excluding meal breaks:
Training Cost calculated by:		Cost:

Training Subject(s) Check the boxes that apply to the event:

Accounting/Finance	Health and Wellness	Productivity
Active Shooter	Help	Professional Development
Archiving	Human Resource	Project Management
Career Development	Human Resources	Safety
Communication	Information Technology	Statewide Benefits
Compliance	Interpersonal Skills	Supervision
Computer/IT	Languages	Teambuilding
Continuous Quality	Leadership	Technical Skills
Improvement	Leadership Development	Time Management
Contracting	Management	Violence
Customer Service	Pension	Violence Prevention
Diversity	Performance Management	Workforce Planning
Ethics	Personal Development	

Statewide Training and Organizational Development Use Only

Accounting FY:	Amount Funded:	If Yes, Has the signed Agreement been:
		Received by T&OD?
		Submitted to DHR Financial Services?

BCTP Event Form 20210305 Save As Submit