

TRAINING PROPOSAL

State Agency/Department:	Budget Coo	le:	Date:	
Street Address:				
Agency Contact Person:	Email:		Telephone:	
Title of training to be offered:				
Description of training and w	hat participants will ga	in (attach curriculum or vendor	proposal if possible):	
Describe the need for the train	ining:			
Describe how training will enhance employee promotional potential:				
Describe how you will measure the training's effectiveness:				
Proposed training period:	From:	То:		
Total Amount Requested:				
Breakdown of costs:		\$		
Other Costs:				
Describe how the agency will contribute to the cost of training and support of employees after training?				
Number of employees to be trained:		Number of hours of training per employee:		
Expected location of training (e.g., onsite, offsite at State facility, offsite at vendor facility):				

Target audience by Titles and Pay Grade:					
Can this training be open to other Stat	e employees if seats are available?	Y/N:			
Point of Contact to coordinate reservations of shared training seats:	Email:	Telephone:			
Organization providing training (if different from the agency requesting funds):					
Vendor/Provider:	Company Website:				
Mailing Address:					
Vendor Billing Point of Contact:	Email:	Telephone:			
Name of Trainer:	Email:	Telephone:			
Are you requesting funding from any other sources for this training? Y/N:					
If yes, please attach an explanation of requests for additional funding:					
Additional Comments:					