

**Campus Facilities
Training Attendance Report**

Please complete this report after attending training programs/conferences which are not coordinated by the Training & Development Unit.

Please return the completed form to Kate Walker, Training & Development, Room 180 GSB.

Department/Unit _____ Director's Signature _____

Course/Conference Title _____ Course/Conference Hours _____

CEU's _____ PDH's _____ IIDA _____ AIA _____

Course Code (Do Not Enter, Training Dept. Enters this)

Please place a check mark by the appropriate box:

- Training Course
- Conference
- Safety Training
- Lunch & Learn
- Webinar (Systems Development only.)

If you attended a Training Conference please provide Sponsor's name.

Location

Conference or Course Date

Please provide copy of certification (if applicable), vendors training course description with this form.

Please print legibly below employee's first and last name, or attach class roster.

