



District TRAINING PROPOSAL

We, _____, in conjunction with District 13 Training Association,
Name of district/department

would like to host _____
Title of training/class

on _____ at _____
Date and Time or Times Location of Class or Training Site

Training items on hand

Training items needed from District 13

Registration Form, Online Registration, Computer & PowerPoint Box, Training Props,

Is there a fee for the Class YES NO

If Yes, Fee amount \$ _____ Fee to Student or Fee to Agency or District-13

What is included in the Fee? _____

Will a DPSST, Roster & N.O.C. C. be issued YES No or Other

Explain below if, No or Other is marked _____

Lead Instructor: _____ Email: _____

Contact person: _____ Email: _____
Full Name – write legibly

Contact Person Phone number

Approved by District 13 representative

Date