

Request for Training Supplemental to the RDC Training Schedule

Name of Program:
Name of Person making request:
Date of Request:
of staff employed at program:
RDC Region:
Training Curriculum being requested:
Name of trainer (if one has not been chosen, please discuss options with local RDC):
Is the trainer a level 4 trainer on the MRTQ trainer registry?
Has the trainer completed the Train-the-trainer on this curriculum?

What is the justification for this request?

When is the training tentatively scheduled for? (this date must be at least 60 days from date of request)