



**Additional Information:** request for specific trainer, issues to address during training, goal of training, deadline for completion, etc.

**Training Room Details:**

Is the room equipped with the following:

- |  |            |           |
|--|------------|-----------|
| Enough adult-sized chairs for all participants?  | <b>yes</b> | <b>no</b> |
| Outlets for a laptop computer & projector?       | <b>yes</b> | <b>no</b> |
| Projector screen or white wall for presentation? | <b>yes</b> | <b>no</b> |
| Space for flip chart?                            | <b>yes</b> | <b>no</b> |

**Other information about your space:**

**How did you hear about us?** (Please select all that apply)

E-mail      Brochure      Word of Mouth      Website      Other: \_\_\_\_\_

**Office Use Only**

<input type="checkbox"/> Permit	<input type="checkbox"/> Outlook Calendar	<input type="checkbox"/> Trainer Confirmation