Constant of the UNIVERSITY OF ARIZONA Office of the General Counsel

REQUEST A WORKSHOP OR TRAINING

Contact and Department Information:

Requestor's Name and Title:

Department Name:

Telephone Number:

E-mail Address:

Workshop or Training Requested:

- Public Training
- Private In-Service Workshop
- Conference/Speaker Presentation
- Other: Please explain

Details of Workshop or Training You'd Like OGC to Provide:

Participant Information:

How many participants do you expect to attend?

What are the professional roles of the expected participants?

Preferred Dates:

Please choose the month you would prefer to hold the workshop or training:

(To assist in our planning, the earliest date should ideally be at least 30 days from the date of request.)

Departmental Approval:

Departmental administrator name and title (printed):______

Signature: _____

_Date: _____

Instructions:

- 1) Complete form, including Departmental administrator's signature.
- 2) Submit completed request form to the Office of the General Counsel via e-mail at <u>OGC-Info@email.arizona.edu</u>.