



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

Conference/Speaker Presentation

Private In-Service Workshop

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 [OGC-Info@email.arizona.edu](mailto:OGC-Info@email.arizona.edu).