



TRAINING DIVISION

Baltimore City Department of Human Resources
 201 East Baltimore Street, 2nd Floor, Baltimore, MD 21202
 Phone: (410) 396-1411 Fax: (410) 545-3289 TTY: (410) 396-4930
 training@baltimorecity.gov

TRAINING COURSE REGISTRATION FORM

Please review instructions on page 2 before completing this form.

TRAINING APPLICANT INFORMATION: SECTION A

Last Name:		First Name:		MI:	Date:
Job Title:					
Agency/Bureau/Division:			Have you ever attended a training workshop? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Work Address (Street, Room, Floor):					Zip:
Work Phone:		Work Fax:		Work E-mail:	

COURSE INFORMATION: SECTION B

Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Course Code:	Course Title:	Course Date(s):	Cost:
Total Number of Courses:			Total Cost Budgeted:

AUTHORIZATION: SECTION C

By my signature, I certify that this employee is authorized by me to attend the training course(s) identified on page 1 and confirm that this employee has taken the prerequisite courses and/or has demonstrated the level of skill necessary in order to participate successfully in advanced coursework. Additionally, I understand that this employee is excused from normal work assignments during the hours of the training course(s), as scheduled, once the employee receives an attendance confirmation from the DHR Training Division.

Supervisor's Name (Print): _____ Date: / /

Supervisor's Signature: _____ Work Phone: _____

Work E-mail: _____ Work Fax: _____

PAYMENT INFORMATION: SECTION D

Budget Code Number:																														

REGISTRATION PROCEDURES

1. Review the schedule of course offerings.
2. Check for schedule conflicts.
3. Applicant completes **SECTION A & SECTION B**. Section B is completed by selecting courses from the current Training Division Training Catalog or by contacting the DHR Training Division for additional course information.
4. Applicant must forward registration form to immediate Supervisor for completion of **SECTION C & SECTION D**, the signature and authorization requirements.
5. Completed registration form is then forwarded by mail to:

The Training Division
Baltimore City Department of Human Resources
201 East Baltimore Street - 2nd Floor Baltimore, MD 21202
 or
Fax to (410) 545-3289

TRAINING CANCELLATION POLICY

If notice of cancellation is received at least three working days prior to the scheduled class date, the agency will not be charged for the registered training. However, if notification is not received at least three working days prior to the class start date, or the applicant does not show up for training course (**No Show**), the agency will be charged for the full amount and no credit or refund will be issued.

ARRIVING LATE/EARLY

You are encouraged to arrive on time as well as remain for the duration of all training courses. It is disruptive to the learning environment when participants arrive late and/or early. Please review your schedule before registering for a class to ensure that you can participate in the entire training course.

“Developing a Productive Workforce.....Progress Through People”

For all of your training needs, contact the DHR Training Division at (410) 396-1411.
Customized Training and Retreat Facilitation are also available.