UNITED STATES MILITARY ACADEMY ON-SITE TRAINING REQUEST FORM

This form is a local substitute for DD Form 1556, Request for Training, and may be used when requesting a space in a USMA-sponsored, on-site training course ONLY when the training is at no cost to requesting organization and is less than 80 hours in length. (For requests for off-site training from government or non-government sources or for on-site training of more than 80 hours, you must submit a fully-completed DD Form 1556). Please forward completed form through your activity training coordinator to CPO, T&P.

COL	JRSE TITLE
DAT	E(S) OF TRAINING
NAM	ME
(Plea	ise type or print legibly)
SSN	N
	SITION TITLE
ARE	YOU A SUPERVISOR? YES NO
SER	RIES / GRADE
	YOU REQUIRE SPECIAL ACCOMMODATION? YES NO (HANDICAP / DISABLED)
IF S	O, INDICATE REQUIREMENTS
ORG	GANIZATION / ACTIVITY
E-M	AIL ADDRESS
PHC	ONE NUMBER
NAN	ME OF SUPERVISOR
(Ple	ease type or print legibly)
SUF	PERVISOR'S SIGNATURE
DAT	TE OF REQUEST
	DISCLOSURE: Personal information provided on this form is given on a voluntary basis. Failure to provide this information, however, may result in ineligibility for participation in training programs.
R CPO USE QUEST DIS	
	COMPLETED INCOMPLETE
	CANCELLED NO SHOW