

Office of Human Capital Management
Learning Center
USER REQUEST FORM



CIVIL SERVICE EMPLOYEE	INTERN	CONTRACTOR
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1. Employee Name ▶	2. Date of Request ▶	3. Phone/Extension ▶
4. Organizational Code ▶	5. Job Title ▶	

COURSES
Fill in Courses only. Starting date, Ending date, and Total Hours will be filled out by the Learning Center Staff.

6. Course(s) Requested	Start mm/dd/yyyy	End mm/dd/yyyy	Total Hours
▶			
▶			
▶			
▶			
▶			
▶			
▶			

7. Justification (Explain benefit of course in terms of employee's job responsibilities)
▶

APPROVAL SECTION
Signature required only if course is more than 8 hours in length and/or non-job related and taken during duty hours

8. Supervisors Name (Printed) ▶	9. Org Code ▶	10. Supervisors Signature ▶
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TRAINING ACTION
To be completed by GSFC Learning Center Coordinator

Course Type:
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