



### Training Date/Location/Time Submittal Form

Today's Date: \_\_\_\_\_ (Office Use Only: Event ID # \_\_\_\_\_)

Trainer Name: \_\_\_\_\_ Registry ID#: \_\_\_\_\_

Sponsoring Agency (if applicable): \_\_\_\_\_

Event Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Title of Training Event (Must Already Be Registry Approved):  
\_\_\_\_\_

Location of Training (complete address required): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of Training Sessions: \_\_\_\_\_

Times of Training Sessions: \_\_\_\_\_

**Please be advised that this form must be submitted to the PBC Registry at least 45 days prior to the first scheduled training session if SEEK scholarship is available to participants. If SEEK is not available to participants, this form must be submitted at least 15 days prior to the first scheduled training session.**

By signing below, the trainer/training agency indicates understanding of the above statements.

\_\_\_\_\_  
Trainer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sponsoring Agency Representative Signature (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sponsoring Agency Representative Name

\_\_\_\_\_  
Date