



Custom Fit Training Training Assistance Request

Instructions:

This form is to be used by Utah businesses that wish to request training assistance for company employees (including owners) from Custom Fit Training at Snow College. Completing this form is the first of four simple steps. **This form and approval of training (step two) must be completed PRIOR TO the training. Companies that do not adhere to this requirement will not be eligible for the sought after training assistance. Retroactive approval is not allowed by state Custom Fit Training policy.**

1. Complete this form and submit it to Custom Fit Training at Snow College by **faxing to (435) 553-0945**.
2. Discuss details of training with Custom Fit Training representative (after we receive this form a representative will contact you to discuss the details of your training need/solution).
3. Provide required documentation (trainee information, payment record, etc.)
4. Complete the training!

Employer Information

Company Name _____ Contact person name _____

Company Address _____

Company Phone _____ Fax _____ E-mail _____

Training needs and possible solutions

In the space below briefly describe training needs your company may have between now and the end of next June (close of our fiscal year). Multiple needs may be noted. Custom Fit Training representatives have expertise to assist you with identifying and selecting training solutions to meet your needs. However, if you are already aware of specific training sources that may meet your training needs please complete the "training solution" sections for each need as well. Because funds to assist with training are limited, it is best to make requests as far in advance as possible:

Training need 1 _____

Deadline/desired time frame for training: _____ # of employees to be trained _____

Possible training solution 1: Training company or trainer name _____

Name of training program or class: _____

Possible date(s) _____ Estimated cost \$ _____

Training need 2 _____

Deadline/desired time frame for training: _____ # of employees to be trained _____

Possible training solution 2: Training company or trainer name _____

Name of training program or class: _____

Possible date(s) _____ Estimated cost \$ _____

Please copy this form and fill in additional training needs and possible solutions as needed. If you have questions please call (435)893-2206.