



JOB RELATED TRAINING (JRT) PROGRAM REQUEST

This form is only to be used <u>electronically</u> in conjunction with a travel request. For JRT without travel, fill out and print the form, attach a completed <u>check disbursement form</u> and documents from the vendor showing course name, date, and cost and send all to MS28D.

Trainee Information			
Name:	Date:	JLab emai	il:
Div/Dept:	Extension:	Supervisor Name	e:
Class Information			
Class Title:		Vendor:	
Class Dates:	to	Location:	
Cost without travel:	POA		44-004
JSA <u>will not pay</u> for JRT trains than JLab. Class time is duty	• •		paid by an institution other
List below the lesson objec JLab job.	tives of the course or the	e key skills that are directly	associated with your
Supervisor Approval			
By submitting this form, I agree appropriate use of Lab resour		t for the requested training is	s job-related and an
Signature:		Date:	
Training Office Use Only			
Conference Management Exemp	otion:		
Including activities such	as regular courses of instruct	hich does not exhibit indicia of a tion or training seminars at the N courses of instruction or training	National Training Center, and

Office of Management for Acquisition Workforce related to the core activities of the Department.

Classroom training available through Federal and commercial sources required as part of a certification program required for the performance of an employee's position which does not exhibit indicia of a formal conference.

None of the above applies