

HRM-Sponsored Training Registration Form

Human Resources and Organizational Management Branch, Headquarters, U.S. Marine Corps

Instructions: Please complete this form to request to register for the selected course. Enter all of the information below. Items marked with an asterisk are required. Once your request has been processed you will receive an e-mail notifying you of your registration status. Please allow at least two (2) business days to process your request. NOTE: You may need to enable PDF features in order to fill out the form.

Course Information

Course Title*	<input type="text"/>	Course Start Date*	<input type="text"/>
Course Start Time*	<input type="text"/>	Course Location	<input type="text"/>

Student Information

Student Name*	<input type="text"/>	Student E-mail*	<input type="text"/>
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Please enter the official name of the student being registered as you would like to see it on the Course Completion Certificate (e.g.: Sgt John P. Smith)

Please enter the student's e-mail address to which class notifications should be sent (e.g.: john.smith@usmc.mil)

Student Phone # *	<input type="text"/>	Student Type*	<input type="text"/>	Supervisory Status*	<input type="text"/>
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Please list Work Phone Number (e.g.: 703-000-0000)

Student Work Location	<input type="text"/>	If you selected "Other" please specify	<input type="text"/>
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Military Branch	<input type="text"/>	If you selected "Other" please specify	<input type="text"/>
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Select the Military Branch with which you are affiliated (whether as military, civilian, or contractor)

Organization	<input type="text"/>	If you selected "Other" please specify	<input type="text"/>
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Student's Rank/Grade	<input type="text"/>	Student's Civilian Series (for civilian employees only)	<input type="text"/>
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Supervisor Name*	<input type="text"/>	Supervisor E-mail*	<input type="text"/>
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Please enter the name of the Supervisor who has approved your class attendance (Required)

Please enter the e-mail address of the approving Supervisor (Required)

Check this box if you need **Reasonable Accommodation** to attend this class. Reasonable Accommodation is defined as an adjustment to a work environment which enables an employee with a disability to attend.

Reasonable Accommodation Type Required	<input type="text"/>
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