



WORKFORCE DEVELOPMENT
CCM EMPLOYEE
PROFESSIONAL DEVELOPMENT & TRAINING REGISTRATION

Date: Department ID: 01- -9329
(Dept. # to be charged)

Employee Name: Employee Phone #:

Course Name: Course Section #:

Course Date & Time:

One-Day Training Programs: Open Enrollment Course:
Cost (circle one): 8-hrs/\$239 6-hrs/\$179 4-hrs/\$119 Per Schedule: \$

Department Director Approval: Date:

Director Extension:

- 1) Select a course and complete the top half of this form. (One course per form.)
2) Present to your Supervisor/Director for approval. Note all classes are charged to a department's professional development budget.
3) Register for your course online or at WFD office (SCC 125) up to "Save & Exit" just before the Payment tab on the right of the screen.
4) Upon completion of these steps, the form must be sent to both WFD and to the Bursar's office.

Questions regarding courses, section, schedule or content may be directed to the Center for Workforce Development, extension 5187.