

COURSE OUTLINE

Course Title: *List the course title for the short-term or long-term training program.*

Training Provider:

- Technical College Company
 Vendor Roster for On-the-Job Training*

** Prior to implementation of On-The-Job training, submit this form along with the training plan. At the conclusion of each training, submit Roster for On-the-Job Training, which includes the roster and training time frames (beginning and ending dates).*

Estimated Number of Eligible Employees:

Estimated Course Cost:

Estimated Number of Course Hours:

Course Description:

Training Modules/OJT Task List: *List the titles and hours of each learning module or OJT task list being provided.*

Core Learning Competencies/Outcomes: *What will the student be able to do at the end of the short-term or long-term course?*

Justification: *How does this training qualify?*

Company Representative (Signature Required)

Date

Technical College Representative (Signature Required)

Date