Training Request Form

Introduction

This form is designed to help you think through a learning or development need and present relevant information to request support through training or other learning.

Your details

Name:

Job title:

Department

Learning need

What training would you like to undertake?

Please note here whether the training would be internally or externally provided

☐ Internally

☐ Externally

If internal, please note whether there are existing methods for providing this training. If there are no existing methods, please note how you think the training may be provided

What are your objectives in undertaking the training? Please also indicate when you think this training would need to be completed by

Please explain why you think this would be beneficial to Metaverse VR

How will we be able to measure your success following completion of the training?

Please note here anything else you wish to add in connection with your request

Employee signature: _____

Date: _____

Line Manager signature: _____

Date: _____

COO comments and approval:

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