

## UCSB Human Resources Training & Development Course Enrollment Form

COMPLETE ONE FORM FOR EACH REQUEST

Mail to: Training and Development  
Human Resources UCSB

Fax: x8645

Course Title:			
Course Code:		Location:	
Begin Date:		Begin Time:	
Name:			
Phone:		Email:	
Department:		Job Title:	
Staff:		Academic:	
Date of Hire:			

<b>Ethnic Identity</b> (information used for reporting of training efforts):							
Am. Indian:		Asian:		Black:		Hispanic:	
White:							

<b>Gender:</b>			
Male:		Female:	

Charge Budget:	8- _____ - _____ - _____		
Barc No.:			
Date:		Fee:	

Supervisor's Signature:	
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If paying by check attach check to form and send via mail.  
 Faxed applications to be paid by check will NOT be accepted  
 Make checks payable to: **Regents of the University of California**

**Cancellation Policy:** A 48 hour notice of cancellation is required if you are not able to attend this class. Your departmental budget will be charged regardless of whether the class is attended. Please call the Training Office at x3482 to cancel your enrollment, otherwise you will be charged for the class.