SHORELINE COMMUNITY COLLEGE
Classified Training & Staff Development

Training and Development

Mission   To financially support and enable classified employees to attend training that will enhance their current job performance and / or provide professional and personal growth opportunities.

Definition   Training is defined as any job-related training, seminar or workshop, including public seminars, continuing and community education programs, conferences and vocational training, etc.

Obligation   As a recipient of CT&SD funds you have an obligation to do either of the following: 1) Make an oral presentation to the CT&SD committee or a classified staff event **OR** 2**)** Write an article related to your funded activities for the *Class Act*.
Failure to do one of the above will result in denial of all future CT&SD training funds.

Submitting a Request
Permanent Classified Staff are normally limited to a maximum of $150 per fiscal year. There is an exception to the $150 limit if the request is to attend a conference. Depending on the conference, the dollar limit may be increased to a yearly maximum of $225. A complete application will include the following: 1) a completed request form on the back of this page, 2) an attached brochure / or program outline, 3) an approved leave request form (if applicable), and 4) approved travel paperwork (if applicable). Forward completed application materials with immediate supervisor's signature to the Office of Human Resources.

Procedure for review of requests
All training requests will be reviewed with these guidelines in mind:
- Did employee provide all of the needed information? (if not, it will be returned)
- Does the program/workshop/conference support training related to current job or job-related growth?
- If this is a program that has been/will be offered on-site, does the program offer significantly greater depth to justify going off- site?
- Is there funding available per the training program guidelines?
- Has this employee attended training during the past 12 months and exceeded the $150 limit per fiscal year?
- If a previous CT&SD fund recipient, have you met oral/ written presentation obligations?

Notification to Employee - Approved or Not
Generally, the Office of Human Resources will notify the employee requesting the training funds within 14 working days by returning their completed request packet with the appropriate signatures and indicate approval or non-approval of funds.

Final Processing Procedure
If training request is approved and all necessary paperwork (see Submitting a Request directions above) is provided, Human Resources will forward all paperwork to the appropriate department for payment. If approved and a required element (documentation) is missing, authorization for funds will be held pending completion.

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Application for Training and Development Funds

<u>Instructions:</u> Please complete the information below and give this request form to your supervisor for review and recommendation. Once your supervisor completes, forward this form to the Office of Human Resources for processing.

Name _____ **Date** _____

Position Title_____ **Department** _____ **Ext.** _____

Supervisor Name _____ **Division** _____

<u>**Training Description:**</u> I am requesting funding approval to attend the following training/development activity/event, etc.:

Training Activity: _____ **Program Date (s):** _____

Institution/Training Organization: _____ **Location:** _____

Registration/Materials Fee $ _____ **Total Requested $** _____
Please describe how this training request is related to job skill enhancement in your current job OR future professional growth:

_____

_____

_____

<u>**Scheduling:**</u> Check appropriate descriptions
1. ☐ This training is not scheduled during my work time. I am requesting registration/materials fees only.
2. ☐ This training occurs during my regularly scheduled work time. I wish to request the following:
   ☐ Request to modify my work schedule to make up time lost during this training time.
   ☐ Request for unpaid release time to attend this training.
   ☐ Request for paid release time to attend this training.
   ☐ Other: _____

_____   _____
   Employee Signature   Date

1.   **Supervisor Review:**   ☐ Recommend   ☐ Not recommend
    Comments
    _____

    Signature _____ Date _____

2.   **CT&SD Committee Review:**   ☐ Recommend ☐ Not recommend   Funding Amount approved $ _____
    Comments / Modified Approval
    _____

    Signature _____ Date _____

3.   **Human Resource Review:**   ☐ Approved   ☐ Not approved   Funding Amount approved $ _____
    Comments / Modified Approval
    _____

    Signature _____ Date _____

TrainingForm