

TRAINING COST APPLICATION (EXAMPLE)

1. Date:	2. Participant Name:	3. Last 4 digits of SS#:
<p>Training Costs: NCCC allows payment of training costs off this application if the individual is enrolled in a training activity and the below costs are required for the training.</p>		
4. Training Activity Code: _____ Funding Source: _____		
<p>5. Training Needs (please check appropriate box and insert training expenditure amount:</p> <p><input type="checkbox"/> Required Fees \$ _____</p> <p><input type="checkbox"/> Required Books \$ _____</p> <p><input type="checkbox"/> Required Supplies \$ _____</p> <p><input type="checkbox"/> Test/Application Fees \$ _____</p> <p><input type="checkbox"/> Other (please note in box 6) \$ _____</p>		
6. Comments:		
7. <input type="checkbox"/> Check or <input type="checkbox"/> Purchase Order Amount:	Amount: \$ _____	
8. Make Check or Purchase Order Payable to:		
9. Local Agency Use:		
10. Name of Case Manager:	11. Reviewed and Approved by:	