



North East Multi-Regional Training, Inc.

355 Smoke Tree Business Park
North Aurora, IL 60542
Phone: 630-896-8860 Fax: 630-896-4422

TRAINING HISTORY REQUEST FORM

(Fax Training Request to Melinda Ray)

Name: _____

SSN#: _____

How many copies? _____ Date Needed By? _____

Department(s) Employed At

Dates of Employment

_____	_____
_____	_____
_____	_____
_____	_____

Where does this information need to be sent to?

I hereby authorized North East Multi-Regional Training, Inc. to release my personal training records to the above mentioned individual(s), school, college, university, or agency.

Signature: _____

Date: _____

****Please note that any training that occurred prior to July 1995 will require a manual lookup; which can take up to 4 weeks to complete****