

**The University of Tennessee  
Employee and Organizational Development  
Request for Additional Training Credit**

This form may be submitted to request additional training credit for courses taken outside the UT Employee & Organizational Development office or courses not listed in *Training Pages*. Please include all requested information.

Employee Name Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Personnel # \_\_\_\_\_ Title \_\_\_\_\_  
Responsible Cost Center # \_\_\_\_\_ Cost Ctr Name \_\_\_\_\_  
Email Address \_\_\_\_\_ Phone # \_\_\_\_\_

**Event Category:**

- Class                       CPS Recertification                       Conference/Seminar  
 Institute                       EOD Online Supervisory Certification  
 Web-based Training                      *(Please complete ALL sections required for E-learning substitutions before submitting Additional Training Credit form.)*

**Event Information:**

Title of Event: \_\_\_\_\_

Date(s) Attended: \_\_\_\_\_ to \_\_\_\_\_ *(Please complete one form for multi-day events.)*

Location of Event (City, State): \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Number of Training Credit Hours Requested: \_\_\_\_\_

Please provide a brief description of the purpose of the program:

**Presenter(s) Information (if applicable):**

Name: \_\_\_\_\_  UT Employee                       Non-UT Employee  
Name: \_\_\_\_\_  UT Employee                       Non-UT Employee

**Signatures:**

\_\_\_\_\_  
*Employee Signature*                      *Date*                      *Department Head Signature*                      *Date*

**Please return completed form to:**  
**The University of Tennessee  
Employee & Organizational Development  
Suite 220, Conference Center Building  
Knoxville, TN 37996-4125**

**For questions, call the EOD office, (865) 974-6657**