



TRAINING INFORMATION

Please fill out the form below so that we may create a syllabus for the training being provided. For your convenience the form may also be filled out on line at <http://www.jalc.edu/cbi/instructorresources.html>

Organization: _____

Instructor Name: _____

Training Name: _____

Center for Business & Industry Contact: _____

TRAINING DESCRIPTION: _____

OBJECTIVES: (By the end of this training students will be able to)

1.

2.

3.

4.

5.

OUTLINE/AGENDA: _____
