



Special Request Form
OFFICE OF HUMAN RESOURCES, TRAINING SERVICES DIVISION

INSTRUCTIONS: Please complete this form, save a copy to your computer, and e-mail a copy to David Mark at david.mark@maryland.gov. Form must be received 60 days before planned/requested date.

Date of Request:	
Facility/Unit/Administration:	
Type of Request (check one): Classroom Development: Conduct an onsite session of a Scheduled Classroom course (<i>12 attendees required</i>) Name of Course: Managing Matters Program for my management team.	
Facilitation: Facilitate a meeting. Design & facilitate a retreat. Presentation Q/A (<i>1 hour maximum</i>)	
Consulting: (<i>describe</i>)	
Other: (<i>describe</i>)	
Brief Description of Request:	
Planned/Requested: Date: Time: Location: Anticipated number of participants:	
Requesting Person: Name Phone Email Signature _____	
Requesting Person's Appointing Authority: Name Signature _____	
THIS SECTION TO BE COMPLETED BY TSD STAFF	
Target Completion Date:	
Acknowledgement By TSD Chief:	
Acknowledgement By OHR Director:	