

Fax #: 651.345.2215

### JMC Training Request Form

Please fill out the following form and fax it to us. The more dates you put down as "Possible Training Dates," the easier it will be for us to fit your training request into our schedule.

Your name: \_\_\_\_\_

School: \_\_\_\_\_

Phone # \_\_\_\_\_

Training requested:

- Web Training
- JMC Home Office Training
- On-Site Training – **Note:** We do not offer On-Site Training from August 1<sup>st</sup> – September 15<sup>th</sup>. Trainings during those time frames must be Web Trainings

Please list possible dates and times you would like to request training:

1<sup>st</sup> Choice: Date \_\_\_\_\_ Time \_\_\_\_\_

2<sup>nd</sup> Choice: Date \_\_\_\_\_ Time \_\_\_\_\_

3<sup>rd</sup> Choice: Date \_\_\_\_\_ Time \_\_\_\_\_

4<sup>th</sup> Choice: Date \_\_\_\_\_ Time \_\_\_\_\_

What topics/modules would you like covered during the training?

- Attendance       Standards and Benchmarks       Period Attendance
- Schedules       Health       Lunch       State Reporting
- Grades       Discipline       Other \_\_\_\_\_

Please list any information you would like us to note in regards to what you would like covered, i.e. "We have a new office professional" or "We are using a new JMC module for the first time."

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On-Site Training only - please fill out the information listed below:

Training Cost: \$250 - half day, \$500 - full day - \_\_\_\_\_

Mileage Cost: Number of miles round trip from  
108 West Center Lake City, MN 55041 x \$0.505 - \_\_\_\_\_

Purchase order # \_\_\_\_\_

Total Cost: \_\_\_\_\_