

REQUEST FOR TRAINING SUPPORT

1. Name of training program/course (Please attach program/course outline):

2. Name of Institution/
Provider of training:

3. Dates of Training:

4. Location of Training:

5. How would this training/course benefit you in the operation of your business?

6. ESTIMATED COSTS

	<u>ITEMS</u>	<u>ESTIMATED COST</u>
a) Tuition/Co urse Fees		<hr/>
b) Books/Related Supplies (specify)	<hr/> <hr/> <hr/> <hr/>	<hr/>
c) Estimated Travel Expenses (Mileage calculated at 40¢ per km)		<hr/>
d) Estimated Accommodation Expenses		<hr/>
e) Other Possible Related Expenses (specify)	<hr/> <hr/>	<hr/>
Total of Estimated Expenses		\$ <hr/>
Total Amount of Assistance Requested (based on 50% of actual/estimated costs)		\$ <div style="border: 1px solid black; width: 80px; height: 30px; margin: 0 auto;"></div>

OFFICE USE : Approved Amount \$ _____	Ineligible/Not Approved
Assessment Notes:	

