



CSC use only
REQUEST#:

**REQUEST FOR TRAINING  
NJ CIVIL SERVICE COMMISSION  
CENTER FOR LEARNING AND IMPROVING PERFORMANCE (CLIP)**

PO Box 318, Trenton, NJ 08625-0318  
Phone: (609) 777-2225, Fax: (609) 777-2336  
Email: CLIPTraining.Support@csc.nj.gov  
www.nj.gov/csc/employees/training

**INSTRUCTIONS:** Non-LMS platform agencies please complete this form to request training. An account will be created in the eLearning LMS platform to complete the registration process online. If you are a LMS platform user, please request this training online via the eLearning LMS platform.

**NOTE:** You are not scheduled for the requested training until you receive an official email confirmation from the Civil Service Commission Center For Learning And Improving Performance (CLIP) Training Registration.

Course Name: *required		Course Date:	
Course Location:		Other Location Preference:	
Department/Organization: *required			
Participant Last Name: *required		Participant First Name: *required	Participant Middle Initial:
Title:	Employee ID:	Email: *required	
Phone Number: *required			
	<input type="checkbox"/> Check the box if you would like to be contacted regarding an ADA accommodation.		

**Additional Fees:** Non-platform users will be assessed an additional \$20 administration fee which provides access to the LMS platform license. The platform access provides the ability to login to the LMS for six months, printable e-certificates for successful course completion, and various free CLIP Online courses. Additional Online courses are available with a purchased CLIP All Access Pass subscription.

**Cancellation Policy:** As a registered participant if you are unable to attend class, the CLIP Training Registration and your Department's Training Coordinator must be notified at least 10 days prior to the class start date. If your cancellation notice is not received within this time period, the agency will incur the cost of the program. The agency has the option to send another eligible participant to attend the class; however, contact information for the replacement must be received by the CLIP Training Registration 5 days prior to the class date.

**Attendance Policy:** Please schedule your participation carefully as attendance for all hours of each course is required. Late arrival or early departure may result in an attendance code of incomplete or not receiving the certificate of completion with continuing education credits for the course.

**Multi-Day Courses:** Attendance on day one is required. If you are unable to do so, please notify your Department's Training Coordinator and the CLIP Training Registration 10-days prior to the class start date, in accordance with the above listed cancellation policy.

Please initial that you have read and agree to the fees and policies listed on page 1.

Remember, you are not scheduled for the requested classroom training until the CLIP Training Registration receives an approved HR1 form and sends an official email confirmation that you are scheduled to attend.

Printing your confirmation and bringing it to class with you is recommended.

Course Name:		Course Date:	
Participant Last Name:	Participant First Name:	Participant Middle Initial:	

<b>Approval Section</b>	
Supervisor Printed Name:	
Signature:	Date:
Department's Training Coordinator Printed Name:	
Signature:	Date:

<b>Invoice Information (Non-LMS platform Agencies Only)</b>		
Invoice Order Number:	Invoice Account Number:	
Non-LMS platform Agency Contact Name:	Email:	Phone Number:
Billing Address:	Signature:	

**Training Coordinators:** Please submit this form to the CLIP Training Registration, PO Box 318, Trenton, NJ 08625; Fax 609-777-2336; or email to [CLIPTraining.Support@csc.nj.gov](mailto:CLIPTraining.Support@csc.nj.gov). If you have any questions or need additional assistance, please contact us at 609-777-2225.