

New Jersey Career Assistance Navigator (NJCAN)

Training Request Form

*If you are interested in receiving training for your district, please provide the following information:
(Please type in answers and return via email to address listed below)*

1. Name of school:
2. Address of school:
3. Contact person:
4. Title/Position:
5. Email for contact person:
6. Telephone number for contact person (office and cell):
7. Tentative dates for your training (Please list 3 dates to choose from):
8. Tentative time: (Generally trainings begin at 10:00 am)
9. Do you have a NJCAN account for your district? If so, are you the administrator?
(If you do not have an account please send an email to pslp@doe.state.nj.us)
10. Preferred training format (*In-person or Webinar):
*Please indicate how long you would like the training to be (60 min. or 90 min.):
11. Primary audience (who will be attending this training? counselors, teachers, etc.):
12. What would you like the focus of your training to be? (High School, Junior, Administrative or Teacher Resources):
13. The presentation requires a computer, internet access and some type of projector.
Is this available?
14. Will all participants have an account set up prior to training or would you like an informative presentation? (We offer setting up staff accounts with advance notice)
15. Are there any specific details about the day of your training that the trainer should know? (where to park? where to report? etc.)

**Please submit this Training Request Form to Joanne Hamza, Project Coordinator
at njcantraining@gmail.com**

For more information, please call (848) 932-1085