HUMAN RESOURCE DEVELOPMENT INSTITUTE
REQUEST FOR REGISTRATION
CN 318a, TRENTON, NJ 08625

REQUEST #:

INSTRUCTIONS: Complete one form per event. Event Data and Customer Data must apply to all participants; otherwise, submit separate request(s). If not provided by HRDI, attach course description and complete Justification Section located on the reverse side of this form.

REQUEST CATEGORY

- New
- Revision (Please attach copy of Original Request)

EVENT DATA

<table>
<thead>
<tr>
<th>Course Title:</th>
<th>Class Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Date:</td>
<td>End Date:</td>
</tr>
<tr>
<td>Start Time:</td>
<td>End Time:</td>
</tr>
<tr>
<td>Total Hours:</td>
<td>Total Credits:</td>
</tr>
</tbody>
</table>

REQUEST TYPE

(Choose One for Class Type)

- HRDI Open
- HRDI Contract
- Customer SME
- Outside Contractor
- Tuition/Graduate
- Tuition/Undergraduate
- Tuition/Other
- Conference

LOCATION:

CUSTOMER DATA

| Department/Agency: | Division/Institution: | Address: |

BILLING INSTRUCTIONS

(HRDI Training)

In order to process this request, this section must be complete.

- Bill Agency Allocation

Registration and/or Tuition
Per Diem
Travel
Other (Explain)

FUND AGCY ORGN APU ACTY OBJT

| TOTAL x Participants |

ESTIMATED COST PER PERSON

(Non-HRDI Training)

APPROVAL SECTION

<table>
<thead>
<tr>
<th>Supervisor/Requester</th>
<th>Departmental Approval</th>
<th>HRDI Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>___App ___Disapp</td>
<td>___App ___Disapp</td>
<td>___App ___Disapp</td>
</tr>
</tbody>
</table>

Signature/Date

DPF/HR-1(Rev 8/96)