|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Training Request Form** | | | | | | | |
| **Date\*：** | | | | | | | |
| **Requester\*** | |  | | | **Department\*** |  | |
| **Training Type \*** | |  | | | **Class Name \*** |  | |
| **Training Institution\*** | |  | | | **Trainer's Name \*** |  | |
| **Training Time \*** | |  | | | **Training Hours \*** |  | |
| **Training Location\*** | |  | | | | | |
| **Training Objectives and Highlights\*** | |  | | | | | |
| **Expected Participants** | | | | | | | |
| **NO.** | **Name** | | | **Department** | | | **Job Title** |
|  |  | | |  | | |  |
| **Training Assessment** | | | | | | | |
| **Performance Report** | | | **Description** | | | | |
| **□Reflection Report** | | |  | | | | |
| **□Reflection Sharing** | | |
| **□ Work Improvement Plan** | | |
| **□ Share with Colleagues or Others** | | |