
NSU Counseling Center

Professional Development Training Request Form

Thank you for requesting our services to provide training for your department. In order to provide an effective training we would like to get some additional information

Date & time you want services delivered _____

Location: _____

Title of training _____

Type of request: Trainer _____ Facilitator _____ Speaker _____

Time allotted for the training _____

How many people will be attending _____

Who is the target audience that will be attending this training, i.e. administrators, directors, frontline staff etc.?

Are there particular issues that your department/organization is facing as to why you are requesting this training?

What is the theme for your workshop or conference?

What type of training are you requesting?

Any additional comments: