

FIGURE 1

EMPLOYEE ENVIRONMENTAL TRAINING INFORMATION	
FROM:	_____
THRU:	_____
TO:	_____
1. SUPERVISOR COMPLETES THE FOLLOWING:	
Name:	_____
Social Security Number:	_____
Activity:	_____
Position Title:	_____
Series/Grade:	_____
Date of Assignment to Environmental and/or HM Duties	
Brief Description of employee's Duties/Responsibilities:	
Skill Code(s):	
Justification for New Skill Code(s):	
Supervisors Signature:	_____
Date:	_____
Phone Number	_____
Employee Training Records are Attached:	Yes _____ No _____
2. ENVIRONMENTAL, HM/HW TRAINING POC COMPLETES THE FOLLOWING:	
Approved Skill Code(s) as Stated Above:	Yes _____ No _____
Completed Training for Skill Code by DLA-TA Course Identification Number and Title as Certified by Environmental HM/HW Training POC:	
Required Training for compliance:	
State and/or Local Training Requirements	
Environmental, HM/HW Training POC Signature:	
Date:	_____
Phone Number	_____
cc: Initiating Supervisor as Indicated Above	