

Rewards and Recognition
(DOA Personnel Policy No. 33)

Training and Certification Application

Section Name: _____ **Date:** _____

Section Head: _____

Employee Name: _____

Employee Job Title: _____ **Personnel #** _____

1) Does this employee currently have an overall performance evaluation rating of "Successful" or higher?

Yes **No**

2) What is the title of the training or certification received?

3) Describe how this training or certification is directly related to the job held by the employee?

4) How will this training or certification enhance the employee's ability to perform the job?

5) Is the training or certification required as a Minimum Qualification Requirement as outlined on the Job Specification for the job occupied?

Yes **No**

6) Is the training or certification considered post-secondary higher education?

Yes **No**

7) Provide a copy of the training designation or certificate.

8) Was the training or certification paid for by the DOA?

Yes **No**