

SUBCONTRACTOR REQUEST FOR Y-12 NATIONAL SECURITY COMPLEX TRAINING

DATE

- ☐ SCHEDULE TRAINING LISTED BELOW.
- ☐ CANCEL TRAINING LISTED BELOW.
- ☐ RESCHEDULE TRAINING LISTED BELOW.

SUBCONTRACTOR

SUBCONTRACT NUMBER

SUBCONTRACTOR

CONTACT NAME

ADDRESS

CONTACT NUMBER

**LOWER
TIER**

CONTACT NAME

ADDRESS

CONTACT NUMBER

TO BE COMPLETED BY SUBCONTRACTOR

TO BE COMPLETED BY THE COMPANY

Participant

Class

Comments

**Processed
(Date/Initials)**

Training Dates, Times, & Locations

NAME

BADGE

NAME

BADGE

NAME

BADGE

NAME

BADGE

NAME

BADGE

NAME

BADGE

NAME

BADGE

NAME

BADGE

REQUESTED BY:

SUBCONTRACTOR REPRESENTATIVE

DATE

CONCURRENCE:

PROCUREMENT REPRESENTATIVE/SUBCONTRACT TECHNICAL REPRESENTATIVE

DATE

SEND INVITATION TO:

EMAIL ADDRESS

CONTACT NUMBER

RETURN COMPLETED REQUEST TO:

EMAIL ADDRESS

CONTACT NUMBER