



WATER CONSERVANCY BOARD TRAINING CREDIT REQUEST FORM

This information will be used to approve and document other than Ecology sponsored training.

Board Member Information			
Name	Appointment date	Board name	Phone
Training Activity Information			
Title of training activity		Location: <i>City</i> <i>State</i>	
Training activity date(s)		Total hours	
Content/Description: (Attach course documentation if available or summary of activity)			
How does this training relate to your work on the water conservancy board?			
Sponsor of activity: <input type="checkbox"/> Other State Agency (<i>Please list agency</i>): _____ <input type="checkbox"/> Federal Government (<i>Please list agency</i>): _____ <input type="checkbox"/> Educational Institute (<i>Please list agency</i>): _____ <input type="checkbox"/> Other: _____			
Instructor type: <input type="checkbox"/> Contractor Instructor <input type="checkbox"/> Ecology Employee <input type="checkbox"/> Federal Employee <input type="checkbox"/> Other/Unknown <input type="checkbox"/> Author of Reading Material <input type="checkbox"/> State Employee <input type="checkbox"/> College Instructor			
Instructor's or Author's Name (if known): _____			
Signatures			
Board Member signature			Date
For Ecology Use			
Ecology Approval (approved if signed)		_____ <i>Number of training hours credited</i>	Date

Send completed form to
Dept. of Ecology, Water Resources Program
Water Conservancy Board Coordinator
4601 N. Monroe St., Spokane, WA 99205

If you have special accommodation needs or require this form in alternate format, please contact 360-407-6607 (Voice) or 711 (TTY) or 1-800-833-6388 (TTY).

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