

# New Training Application

Submission Deadline for Inclusion in the 2016 Training Calendar:  
October 1, 2015

## Application to Propose New Training

Application process for proposing new training:

1. Complete and submit the following form to [training@nvms.us](mailto:training@nvms.us)
2. The application will be reviewed by the Training Program Manager and a Training Review Panel using the following criteria:
  - a. relevance of content
  - b. trainer credentials
  - c. fit with NVMS training program direction
3. Applicants will be informed if they have been selected to move forward in the application process two weeks after the deadline.
4. In the case of a positive review, additional workshop materials (manual, PowerPoint, handouts, etc.) will be requested and an interview may be scheduled.
5. Submit a video clip, 15 minutes in length, of a live training conducted (if available)

Please address any questions to the Training Program Manager at 703.865.7261 or [training@nvms.us](mailto:training@nvms.us).

### Trainer Information

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1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Phone Number: \_\_\_\_\_
4. Email Address: \_\_\_\_\_
5. Are you a current NVMS trainer? \_\_\_ Yes \_\_\_ No  
If yes, what courses have you taught, and when?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Are you the trainer for any of the 2013 NVMS scheduled trainings? \_\_\_ Yes \_\_\_ No  
If yes, what are the trainings and their dates?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. How many years have you been a trainer? \_\_\_\_\_  
(Include all training experience; i.e., attendance at a train the trainer, etc.)

- 8. Please include a copy of your bio/resume highlighting your qualifications and experience as a trainer.
- 9. Provide two reference letters from past training participants and/or co-trainers. (Reference letters should be submitted in sealed envelopes to 4041 University Drive, Suite 101, Fairfax, VA 22030.
- 10. Has the course been presented in another venue?  Yes  No  
If yes, when and where?

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If yes, submit copies of the course evaluations.

- 11. Is the training material proprietary material; i.e., purchased from a vendor, or publisher?  
 Yes  No. If yes, provide specifics as to cost, any licensing agreement, or copyright issues.

***Proposed Training Information***

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- 1. Title: \_\_\_\_\_  
NVMS reserves the right to modify or change the title to best fit our existing program and ensure optimal marketing opportunities.
- 2. Length of training: (hours) \_\_\_\_\_
- 3. Minimum number of participants required: \_\_\_\_\_
- 4. Maximum number of participants: \_\_\_\_\_
- 5. Does the training require more than the one trainer; i.e., role play observers, assistance. If yes, provide specifics.

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- 6. Program description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 7. Learning objectives (at least 3):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

8. Attach a training course agenda (timed breakdown of material).

9. Audience: A brief summary explaining the audience you have in mind for this training.

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10. Does the course require any prerequisites?  Yes  No

If yes, describe the prerequisite requirements in the space provided below.

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11. Is the course approved for continuing education credits?

a.  Yes

If yes, please check all that apply.

- i.  CME (continuing mediator ethics)
- ii.  MCLE (continuing legal education credits)
- iii.  HRCI/SHRM (HR professionals)
- iv.  CEU (continuing education units)
- v.  Other

b.  No