



### Private Course Request Form

Thank you for your interest in PRWA's private training program. Please complete the following form, so we can better plan for and meet your needs. After PRWA staff receive this form we will contact you to confirm details and further review the request.

#### System and Contact Information

System Name: \_\_\_\_\_

Please Circle All That Apply:     *Drinking Water*                      *Wastewater*                      *PRWA Member*

#### Administrative Contact

This will be the contact for all administrative tasks, and does not need to be on-site for the training.

Contact Name \_\_\_\_\_

Position \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Mailing address \_\_\_\_\_  
\_\_\_\_\_

#### Contact Information For On-Site Needs

This person must be onsite the day of the course, particularly in the morning for set-up. The contact information will be provided to trainer for set-up questions or support needs.

Contact Name \_\_\_\_\_                      Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_                      Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_                      Cell Phone Number \_\_\_\_\_

Email \_\_\_\_\_                      Email \_\_\_\_\_

#### Course Information

Please provide a topic or course number for the course you are scheduling. PRWA does not guarantee the availability of all courses in all areas.

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How many participants will there be? (Note there is a minimum charge of 20 participants per private class)

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*A final roster of participants, with contact information and client ids, must be provided to PRWA 3 weeks prior to the course date.*

Please provide a minimum of 3 possible dates for the class:

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Please provide the desired start time: \_\_\_\_\_

*Note trainer will need access to the training facility 1 hour prior to the start time for set-up.*

**Additional Administrative Needs:**

Will you provide food and beverage? (If yes, please include trainer in numbers)                      Yes                      No

**On-Site Set-up and Location**

Provide the location of the training. You must provide an address for the location of the training, if multiple buildings are present a building name or map of the grounds should be provided. Any directions to the location also are helpful.

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*Room location and set-up*

A training room or area must be provided. The room must be relatively quiet with lighting that allows for use of a projector. The room also must comfortably accommodate the attendees. Please review and provide the following information.

If known provide the name or number of the room which will be used \_\_\_\_\_

Tables and chairs for each participant must be provided, in a classroom style set-up. Will this be prior to the start of the training?                      Yes                      No

An area for the trainer to set-up materials, projector, computer and other training aids is need. A folding table is usually sufficient. Can this be provided?                      Yes                      No

Trainers provide all technical presentation equipment needed for the training. If the room has projectors, or other technology integrated in it, this can improve the training. If this is the case, will available day of for using this equipment?                      Yes                      No                      N/A

Are there any special location considerations? ( How will the trainer access a secured areas? Gate codes? Timing concerns for set-up or tear down?)

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Once filled out, please return to:  
**Stacey Walker, Training Coordinator**  
[swalker@prwa.com](mailto:swalker@prwa.com)  
or via fax to (814) 353-9341