

CALL FOR FIRE TRAINER (CFFT) Training Request Form



Group/Unit: _____

Request Date: _____ **Date(s) of Training:** _____

Start Time: _____ **End Time:** _____

Name of Requestor: _____ **Phone Number:** _____

Email Address: _____ **Unit:** _____ **Number of Personnel:** _____

1. Request for training outside of normal operating hours must be submitted at a minimum of 30 days in advance to Richard Newman@ (804) 734 - 4617, richard.t.newman2.civ@army.mil, TSC, Bldg 6232.
2. Training is available Monday through Thursday 0700-1600 and Friday 0700-1500.
3. Questions concerning scheduling should be directed to Brandon Howard @ (804) 734 - 3536, brandon.w.howard.civ@army.mil located at TSC, Bldg 6232.

Signature CDR/1SG Approval: _____

Date: _____

Signature of Training Facilitator: _____

Date: _____

Approval ____ **Disapproval** ____ **Modified** ____