



Workforce Solutions

Approved Training Providers

Staff Report Form

Staff member

Name:

Office:

Position:

Telephone number:

School and training course:

School contact information:

Name of person to contact if known:

School address:

School Telephone Number:

Provide a brief description of your concern:

Email form to: Barbara.Murphy@wrksolutions.com and
Brandalyn.Patton@wrksolutions.com