



MARYLAND DEPARTMENT OF HEALTH
Developmental Disabilities Administration

Training Request Form

Event Details

Training Title: _____

Type of Event:

Live Webinar Workshop Forum
Conference Training Meeting Other: _____

Training Dates: _____

Start Time: _____

End Time: _____

Contact for Event: _____

Email: _____

Telephone: _____

Presenter's Name: _____

Bio or information about the presenter:

Event Objectives:

Expected or Maximum Number of Participants: _____

Targeted audience and/or Contact list:

Room Setup:

Half-moon

Theater

Classroom

Square

Prerequisites for Attendees:

Desired date of posting: _____

Registration

What information should be collected from registrants?

Examples include names, organization, license number, etc.

Is there a closing date for registration? YES NO _____

Does it need posted on the [DDA Training Calendar](#)? YES NO

Equipment Requirements

Please select yes or no.

YES NO

Projector:

Podium:

Microphone:

Laptop:

Telephone Conference:

Internet:

Sign-in Sheet:

Copies/Handouts:

YES NO

Name Tags:

Evaluation Forms:

Certificates:

Coffee/Tea/Water:

Catering:

Projected Costs

List projected costs for items such as venue, presenter fee, materials, refreshments, etc.

Submission Instructions

Any questions or completed forms should be directed to the appropriate regional professional development staff.

Central Maryland Regional Office

Donna Will: Donna.Will@maryland.gov

Phone: (410) 234-8262

Eastern Shore Regional Office

[Tori Wilkerson: Tori.Wilkerson@maryland.gov](mailto:Tori.Wilkerson@maryland.gov)

Phone: (410) 572-5945

Southern Maryland Regional Office

Michelle Pigford: Michelle.Pigford@maryland.gov

Phone: (301) 362-5124

Western Maryland Regional Office

Alison Johnston: Alison.Johnston@maryland.gov

Phone: (240) 313-3864