PaCE Training Request Form

To request a Postsecondary and Career Exploration (PaCE) training, return a completed PaCE Request Form no more than five (5) months and no less than three (3) weeks prior to the event. Submit your completed PaCE Training Request Form to:

Division of College Access and Outreach
Illinois Student Assistance Commission
1755 Lake Cook Road
Deerfield, IL 60015-5209
FAX: 847-831-8508
E-mail: isac.pace@isac.illinois.gov

SECTION I – Training Logistics

Training Sponsor Organization: ________________________________

Training Location: __________________________________________

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Building/Room Number</th>
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City

<table>
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<tr>
<th>State</th>
<th>Zip Code</th>
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Training Contact:

First Name

Last Name

Title

Organisation

Area Code & Phone Number & Extension

Email Address (required)

SECTION II – Training Profile

Training and Presentation Options: Choose the option that is right for your setting - an hour long overview, half-day or full-day

- [ ] 1 Day (6 hours)
- [ ] 2 Half Days (3 hours each day)
- [ ] 3 - 2 Hour Sessions
- [ ] 1 Hour Overview (A webinar option is available for a group of 10 or less)

Training Date: _______________  MM/DD/YYYY

Training Time: From: _______ a.m. To: _______ a.m.

Training Date: _______________  MM/DD/YYYY

Training Time: From: _______ a.m. To: _______ a.m.

Anticipated Number of Attendees:  

- [ ] Under 10  
- [ ] 11-20  
- [ ] 21-30  
- [ ] Other: ________________________

Audience (select as many as apply):

- [ ] Counselors
- [ ] Principals
- [ ] Teachers
- [ ] Superintendents
- [ ] Administrators
- [ ] Other: ________________________

For ISAC Use Only

ORF Received
Recorded in OD
Staff Assigned
Confirmed
OD Complete

ISAC #F3249 (ON3249) 10/11

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