

DoD Course Preparation Sheet

Course

Course _____

Preferred Dates _____

Alternate Dates #1 _____

Alternate Dates #2 _____

**Company Information
(who is hosting the course)**

Company name _____

Company address _____

City, State, Zip code _____

Contact person _____

Phone number contact person _____

Email contact person _____

Fax number _____

**Class information
(where the course will be held)**

Company Name _____

Address _____

City, State, Zip code _____

Contact person _____

Phone number contact person _____

Fax number _____

Student count

Proposed Number _____

**SHIPPING LOCATION FOR
COURSE
EQUIPMENT/CLASSROOM
MATERIALS**

Company Name _____

Address _____

City, State, Zip code _____

Contact person _____

Phone number contact person _____

Fax number _____

**Reccommended Hotel for
Instructors**

Hotel #1 _____

Address _____

Phone number _____

Web address _____

Hotel #2 _____

Address _____

Phone number _____

Web address _____

Hotel #3 _____

Address _____

Phone number _____

Web address _____