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| --- | --- | --- | --- |
| Requestor |  | Date Requested |  |
| Lesson POC Email Address | CPTraining.VBACO@va.gov | Date Required |  |
| Section I: Lesson MaterialsPlease indicate the documents to be uploaded to the VBA Learning Catalog (ensure documents are attached): |
|  | **Please list any additional materials:** |
| Section II: Lesson Details |
| TMS Item Number | **Existing Item Number (if applicable):** |
| Lesson Title |  |
| Learning Hours |  |
| Target Audience (Select all that apply)**\*\***Be sure to select the intended target audience for the lesson as outlined on the lesson plan. Please refer to the curriculum section below to designate assignments. \*\* | **If other, please specify:** |  |
| Prerequisite Training | Before this training, the employee should have completed: |
| Objective | After completing this lesson, the employee should be able to: |
| Course Description |  |
| Design/Delivery Method(this determines the type of Level 1 evaluation to be attached) | If other, please specify: |  |
| Will this lesson be assigned centrally as mandatory training? If so, please indicate the TMS curricula in which this item should be added.\*\*Be sure to list a required date for all mandatory assignments\*\* | FY19 VSR NTC:**Required Date:** FY19 RVSR/DRO NTC:Required Date: FY19 Claims Asst. NTC:**Required Date:** FY19 Pre-Discharge MSC NTC:**Required Date:**  | Specialized Training Curricula:**If other, please specify:****Required Date (other):**Will not be centrally assigned: |
| New items will be added to the Comp Service and VA TMS Standard user catalogs, unless otherwise specified.Please indicate any additional TMS catalog(s) in which this item should be added: | **If other, please specify:** |
| Section III: Level 1 SurveyPlease note all items will include a Level 1 Survey unless otherwise indicated below: |
| Is there a reason this item should NOT have a Level 1 Survey attached? | **If yes, please explain:** |
| Section IV: Level 2 Assessment |
| Does this item need a Level 2 Assessment (exam)? |  |
| **Additional Information/Instructions (Ctrl + Enter for a new line):** |
|  |

**Please email the completed form and necessary documents to the Compensation Service Training Staff at** **CPTraining.VBACO@va.gov**