

THRESHOLDS Training Inquiry Form

date of request:



CONTACT INFORMATION:

name:

organization:

e-mail:

phone number:



NATURE OF REQUEST :

request type:

briefly describe
request

approximate time
frame for
request:



AVAILABILITY:

best time to reach you?:

between 9 AM and 12 PM

between 12 PM and 5 PM

Other

best day of week

how did you hear about Thresholds?

THANK YOU: A representative from our Workforce Development Department will contact you soon!