



Out of Many/**One Union**
AFGE NVAC/AFL-CIO

**Request for Joint Labor Management Training
provided by the AFGE/NVAC-DVA
National Training and Education Committee**



Date of Request: _____

Facility Name: _____

Administration: NCA VBA VHA OIT Other

Requested Training Dates: _____ **Alt Dates:** _____

**Requested dates must be at least 45 days from the date of request.*

Full Master Agreement Training is two day training on Tuesday/Wednesday or Wednesday/Thursday

Projected number of participants. Union: _____; Management: _____

***Travel and per diem for one union and one management instructor will be the responsibility of the requesting facility. Name of Travel POC (accounting/alt preparer): _____*

Labor (President or Designee)

Management (Director or Designee)

Signed

Signed

Printed Name

Printed Name

Position

Position

Office Phone

Office Phone

E mail

E mail

Send completed form to: VACOLMRJointTraining@va.gov

Any questions prior to submission please contact Marc Shapiro at (202) 461-4014 or Marc.Shapiro@va.gov and/or Bob Fetzer (via Anita Sheetz) at (540) 982-2463 or Bob.Fetzer@va.gov.