

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
MARKETING AND REGULATORY PROGRAMS
EMPLOYEE SERVICES DIVISION
TRAINING AND DEVELOPMENT BRANCH

**Fundamentals of APHIS Human Resource Management for
Probationary Supervisors Course
(FAHRM)
Application Form**

1. APPLICANT'S NAME (<i>Last, First, Middle Initial</i>)		2. POSITION TITLE
3. PROGRAM TITLE	4. WORK ADDRESS (<i>Street package delivery address ONLY; Do not use Post Office Box numbers</i>)	
5. WORK PHONE	6. FAX NUMBER	7. E-MAIL ADDRESS
8. SUPERVISOR'S NAME		9. SUPERVISOR'S E-MAIL ADDRESS

10. PLEASE CHECK THE QUARTER YOU ARE APPLYING FOR
(Consult current announcement for dates)

<input type="checkbox"/>	1ST QUARTER - MOUNTAIN STANDARD TIME	<input type="checkbox"/>	2ND QUARTER - CENTRAL STANDARD TIME
<input type="checkbox"/>	3RD QUARTER - PACIFIC STANDARD TIME	<input type="checkbox"/>	4TH QUARTER - EASTERN STANDARD TIME

11. PLEASE CHECK WHICH APPLY

<input type="checkbox"/>	I AM A PROBATIONARY SUPERVISOR, MY PROBATION PERIOD ENDS _____
<input type="checkbox"/>	I AM A TEAM LEADER RESPONSIBLE FOR SOME ASPECTS OF HUMAN RESOURCES MANAGEMENT
<input type="checkbox"/>	OTHER (specify)

APPLICANT'S SIGNATURE	DATE
SUPERVISOR'S SIGNATURE	DATE

NOTE: Please complete the application, and fax to 301 734-3153. To e-mail, please complete the form using Adobe Acrobat 6.0 Professional or Adobe Acrobat 6.0 Standard or later version, instead of Adobe Reader. Then e-mail to: Training.Applications@aphis.usda.gov
An SF 182 will be required once your enrollment for this course has been confirmed. Thank You for your interest in the FAHRM course.