**Worksheet: Adult Education and Literacy**

**State TA/Training Request**

**PROGRAM INFORMATION:**

|  |  |
| --- | --- |
| Program: |  |
| Site: |  |
| Coordinator: |  |
| Point of Contact: |  |
| Date: |  |

TYPE OF TECHNICAL ASSISTANCE REQUIRED (CHECK ALL THAT APPLY.)

* TE/DATA MANAGEMENT
* HISET™
* AEFLA/AEL
* WIOA
* IET/IELCE
* FISCAL MANAGEMENT
* OTHER\_\_\_\_\_\_\_\_\_

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TYPE OF SPECIALTY TRAINING NEEDED (CHECK ALL THAT APPLY.)

* CASAS TE® REFRESHER
* ABE/HISET™
* ESL/CIVICS EDUCATION
* COLLEGE TRANSITION
* IET/IELCE
* OTHER\_\_\_\_\_\_\_\_\_

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PREFERRED DELIVERY:

* WEBINAR
* FACE TO FACE
* OTHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PREFERRED TIMELINE BY:

* SPRING
* FALL
* AEL CONFERENCE
* COORDINATOR CALL
* MONITORING VISIT