

DOI LEARN Course/Class Template

*If you need a Course Created, answer **all** questions from 1 thru 19*

*If you need a Course and Class created, answer **all** questions from 1 thru 44*

*If you need OED to Create a Class, answer **all** questions from 20 thru 44*

Once completed, please return the form to the OED DOILEARN Support Team:

By email: oeddoilearn@usgs.gov

Or By fax: 303-445-4665

****COURSE Information Needed****

1. **Type of Training:**
2. **Are there any Pre-requisites that you want permanently attached to the Course?**

3. **Are there any Pre-requisites that should only be noted in the Description Area?**

4. **Course Name** (less than 100 characters and abbreviate as necessary):

5. **Course Description:** This description carries over to the Catalog so please do not repeat this same information in the Class Area: (Under 500 characters please):

6. **Training Objective Including Target Audience if necessary** (i.e. WR WSC, USGS Only) (Under 500 characters please):

7. **Course Subject Matter Expert Name:**
Course Subject Matter Expert Phone Number:
8. **URL** (web address, if any to access external materials or provide more info):

9. **How Many CEU's, Semester Hours or Quarter Hours if any?**
Number of Hours: _____ **Type of Hours:** _____
(training duration).
10. **Instructional Training Hours:**
Are there any non-duration training hours? Yes No **If yes, how many?** _____

11. Required EHRI Training Code information (see SF-182 for guidance definitions

at http://www.opm.gov/forms/pdf_fill/SF182.pdf if you have questions about these next fields):

A. Training Designation Type Code:

B. Training Type Code. Identify ONE of these three training types below for each new course:

Type 01 = Training Program Area

If you choose 01 above, choose one of these Subtypes:

Type 02 = Developmental Training Area

OR if you choose 02 above, choose one of these Subtypes:

Type 03 = Basic Training Area

OR if you choose 03 above, choose one of these Subtypes:

C. Training Purpose Type:

D. Training Source Type Code:

E. Training Delivery Type Code:

12. Other Contact Name: (if different than Primary Contact/Course Coordinator above. This is someone who can answer all the questions.)

Other Contact Name:

Other Contact Phone Number:

13. Does attending this Course require Supervisor Approval? Yes No

(Recommend "Yes" if there is a cost And/Or extended time away from work.)

Note: If you choose "No" for Supervisory Approval, and the course is open Department Wide, then DOI employees do not require Supervisor approval to attend the course, which could upset other Bureau's management.

14. Do you want the Learner to have access to a Completion Certificate within the LMS? Yes No

15. For ILTs, do you want the Class Roster to be visible to all? Yes No

16. Course Vendor Name (who is providing the training? Example: Franklin Covey or USGS ER WSC, etc.):

17. Who do you want to be able to see and apply for this course?

A. Public Catalog: Yes No

*Public means that everyone can see and apply for it.

B. Department Wide: Yes No

*Department Wide means that all Bureaus in the Interior using DOI LEARN can see and apply for it.

C. USGS Only: Yes No

*USGS Only means that only USGS personnel can see and apply for it.

18. Course Category. Identify one or more of these categories for each new course: (Where sub-categories exist they are indented and italicized below their main category.)

Accounting & Auditing

Market Fundamentals

Biology

Civil Rights

Clerical

Communications

Acquisition & Contracting

Administrative & Support Tools

Business Administration & Financial Management

COR Training

Financial Business Management Systems (FBMS)

Computers

Concessions	Conference Workshop
Conflict Alternative Dispute Resolution (CADR)	Cultural Resources
Customer Service	Distance Learning
Diversity	Emergency Management
Employee Development	Engineering
Environmental Regulations & Planning	Equal Employment Opportunity (EEO)
<i>Hazardous Materials</i>	Ethics
Evaluation	Facilities Management
Federal Information Systems Security Awareness (FISSA)	
Fire & Aviation Management	Historic Preservation
Human Resources	IDEAS
<i>Benefits</i>	Information Technology
<i>Classification</i>	<i>Computer Information Systems (CIS)</i>
<i>Competency Management</i>	<i>Geographical Information Systems (GIS)</i>
<i>Federal Hiring Reform</i>	<i>Geospatial Data</i>
<i>Training & Development</i>	<i>Plan of Actions & Milestones (POA&M)</i>
<i>USAccess PIV</i>	Internships, Certifications & Special Programs
<i>USERRA</i>	Interpretation
Law Enforcement	Leadership
<i>IMARS</i>	Legal Training
Legislative Affairs	Management
Mediation	NASIS
Natural Resource Management	Oil & Gas Management
<i>Adaptive Management & Decision-making</i>	
<i>Fire</i>	Online Training Course
<i>Geospatial Sciences</i>	Orientation
<i>Minerals Administration</i>	Outreach & Public Affairs
<i>Physical Sciences</i>	Partnerships
<i>Realty</i>	Personnel Security
<i>Reclamation</i>	Planning & Analysis
<i>Renewable Resources & Life Sciences</i>	Planning, Design & Construction
<i>Water</i>	Privacy
Probate	Program Management
Program-Mission	Realty
Records Management	Regulation Drafting
Role Based Security Training (RBST)	Safety
Safety & Health	<i>Hoover</i>
Self Determination	Skillsoft
Supervision	TAAMS
Test Category for LMS Functionality	Trade & Craft

Trust Responsibilities

Visitor Use

Volunteer Management

(Other) If none above fit, type something here and OED will help decide:

19. Actual Instructors to be Evaluated? (Provide all full names with phone numbers of those teaching.)

****CLASS Information Needed****

20. Course Name and/or Course Code associated with your Class (Enter if you only need a Class created):

21. City, State and Time Zone where Class is being held:

22. Primary Contact/Course Coordinator This is **NOT** the person **teaching the Class.** It should be the person **managing** the Class(es)/Roster(s):

Primary Contact/Course Coordinator Name:

Primary Contact/Course Coordinator Phone Number:

23. Do you want this Class marked as Private? (This means that you want it in the system but not viewable in the catalog so that it can be managed behind the scenes only.) **Yes** **No**

24. Tuition Cost (must be the same for both Internals and Externals):

IMPORTANT: Make certain that you charge enough to pay the tuition regardless of enrollment numbers or have a backup plan if you do not have a full roster.

25. Is OED collecting the Tuition? **Yes** **No** (if no, whom?)

26. Any additional Class Tuition information you want noted? (Under 150 characters please):

27. Maximum Class Capacity:

28. Enrollment Options?

29. Minimum Attendees:

Note: Entering a number of minimum attendees will require a Registration Closed Date & Time, as the automatic cancellation of the class is controlled by that date.

30. Automatic Cancellation Reason:

Note: An Automatic Cancellation Reason must be selected when the Minimum Attendees field is populated.

31. Send email reminders? **Yes** **No** **How many days prior?**

32. What do you want the reminder to say?

33. **Other Contact Name:** (if different than Primary Contact/Course Coordinator above. This is someone who can answer all the questions.)

Other Contact Name:

Other Contact Phone Number:

34. **Actual Instructors to be evaluated?** (Provide all full names with phone numbers of those teaching.)

35. **Do you have any Special Class Information that you want to make known in the DOI LEARN Catalog for all to see before they register?** (Do not duplicate the Course Description info here...Example: For USGS Only or For Supervisors Only; or Bring sunscreen; or Meet at the pool; or Class ends early on the last day, etc.)
(Under 300 characters please):

36. **Do you have a Cancellation policy** (Under 100 characters please):

Note: Instructors/POCs can add a Cancellation Message if needed (optional).

For USGS NTC in Denver, see: <https://www2.usgs.gov/humancapital/documents/learnsupportservices.pdf>.

37. **Class Vendor Name** (Who is providing the training? Example: Franklin Covey or USGS ER WSC, etc.):

38. **Date(s) of Class (mm/dd/yyyy):** **Begin Date:** **End Date:**

39. **Day(s) and Time(s) (HH:MM am/pm) of Class:**

Monday	Start Time:	End Time:
Tuesday	Start Time:	End Time:
Wednesday	Start Time:	End Time:
Thursday	Start Time:	End Time:
Friday	Start Time:	End Time:

Note: If you need additional Class Sessions created under the same Course, please attach a Word document that includes the following: Dates/Times/Time Zone, City & State, Location, Classroom, Point of Contact and Phone Number, Start and End Registration Dates/Times, Max number of Students and Target Audience.

40. **Class Instructional Training Hours:** (training duration)

41. **Registration Open and Close Dates (mm/dd/yyyy).** These are the dates the Class will be viewable in the Course Catalog.

Open Date:

Close Date:

42. Exact Location (Include building number/name/complete street address with city, state & zip code.)

43. Classroom Name: (If you do not know the exact classroom name/number, include a range of possible room names or numbers in the Location where the Class might be offered –OR– indicate TBD.)

44. Do you want this Class advertised by OED?

Yes

No