## **<u>8<sup>TH</sup> COASTAL REGION – REQUEST FOR ANNUAL RISK MANAGEMENT REFRESHER WEBINAR</u>**

## Unit Leader Requesting Webinar

E-Mail address of Unit Leader Making Request

## Participants

Last Name	First Name	MID	Flotilla

Primary Date Requested Start Time

Secondary Date Requested	Start Time	

E-Mail Completed Form to Richard Liliedahl, DSO MT

rliliedahl@gmail.com

(832) 247-5906 - Cell

## **INSTRUCTIONS**

- 1. Name and Office of Unit Leader making Request
- 2. Participants -Name, Member ID Number and Flotilla of each participant. No more than 5 participants per webinar.
- 3. Primary Date being requested for the webinar. Keep in mind that Saturdays and/or Sundays are preferred as the Refresher could take between 3 and 4 hours to complete.
- 4. Secondary Date being requested should there be a problem scheduling an on-line Facilitator for the Primary Date.
- 5. E-mail completed form to the DSO MT who will assign an on-line Facilitator for the webinar. The facilitator will contact the Unit Leader making the request to coordinate the start time for the webinar and assure with the Unit Leader that all participants will have all needed participant materials and handouts.

6. The Facilitator will be responsible to provide Report of Workshop Attendance form Unit IS Officer or DSO MT for entry into AUXDATA.