# Trainer Application Instructions

This is the official form used for hiring purposes for WTCE Trainers. This form should be completed by the trainer and given to the Associate Vice President of WTCE.

Trainer Applications should be routed to Human Resources by the Associate Vice President of WTCE for processing after completion. Please contact Human Resources at (956) 295-3777 with questions about the completion of this form.

## Detailed Instructions

**Section 1**

| **For new and current employees please fill out all boxes in the EMPLOYEE INFORMATION section. The definitions are as follows:** | |
| --- | --- |
| Employee Name | Person's official name. |
| Employee ID or last 4 digits of SSN | FOR EXISTING EMPLOYEES ONLY – the number assigned by Colleague/Human Resources; for non-employees use the last 4 digits of social security number. |
| Course # | Number of the course assigned. |
| Class Name | Name of class assigned. |
| Start Date | Official first day of class. |
| End Date | Official last day of class. |

**Section 2**

| **Please fill out all boxes in the TRAINER AGREEMENT section. The definitions are as follows:** | |
| --- | --- |
| Check one of the boxes | Check the box that applies to you. |

**Section 3**

| **FOR BUDGET USE ONLY** | |
| --- | --- |
| **Human Resources is responsible for routing the Trainer Application (TA) form to the Finance office for completion.** **The definitions are as follows:** | |
| | |
| Budgeted | Salary budgeted for this position. |
| GL Account | GL Account assigned to pay trainer. |
| Budget Verification | Signature of approval for available funds. |
| Date | Date of the approval from budget. |
| Payment | Choose how trainer will be paid: semi-monthly, End of the month or other. |
| Explain | Make notes if other than Semi-monthly or End-of-month. |

**Section 4**

| **APPROVALS** | |
| --- | --- |
| Official Signatures | Associate Vice President of WTCE must check the nepotism affirmation box and route application to the Human Resources office. |