



AFTB Unit Training Request

**Army Family Team Building
3499 Daniel Street
Fort Jackson, SC 29207
Phone: 751-6315**

1. Today's Date: _____
2. Modules ,Theme, or type of briefing requested: _____
3. Requesting Unit: _____ Location:_____
4. Unit POC: _____ Phone: _____
5. Expected Number of Participants: _____
6. Date and Time of Training _____
7. Do you have support for PowerPoint Presentations? ____Yes ____No
8. Other materials and/or equipment provided by unit:
 _____DVD/TV _____Access to Xerox

SpecialRequest _____

AFTB will be responsible for supplying a qualified instructor who will arrive on time (if not early) and be professionally attired for training. AFTB will provide all applicable training material for the briefing. The requesting unit will provide all above checked equipment and/or materials and will assist in ensuring unit attendance.

Veronica Jackson-Patrick
AFTB Program Manager

Signature, POC for Requesting Unit