



## TRAINEE INFORMATION FORM

Trainee's Name: \_\_\_\_\_

Type of Training: \_\_\_\_\_

Division: \_\_\_\_\_

Effective Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Funding source (Oracle String): \_\_\_\_\_

Is the trainee an UAB student? \_\_\_ Yes \_\_\_ No

If not, what college do they attend: \_\_\_\_\_

Does the trainee have other assignments at UAB? \_\_\_ Yes \_\_\_ No

If so, what department? \_\_\_\_\_

Department contact person and number? \_\_\_\_\_

*\* If the trainee has another assignment at UAB, it must be approved by the Graduate School prior to making the traineeship offer. The contact person for the Graduate School is Darrell Ray, his email address is [Dray@provost.uab.edu](mailto:Dray@provost.uab.edu), and phone number is 975-7188. Please submit a copy of the approval letter/email to Karen Brooks.*

### Attach the following documents with form:

- Signed offer letter
- Demographic sheet
- Technology Agreement
- Mal-practice Application, if applicable
- UAB Application
- Copy of licensure, if applicable

