DOCUMENT NAME: Training

DOCUMENT TYPE: 30

1. **Description**: Training purchased with the Request, Authorization, Agreement and Certification of Training (SF-182) will always be coded as document type 30. Training purchased with documents other than the SF-182 and its related document types are shown below. You should refer to these document types when they are used to procure training.

Procurement Document	Document Type
Order for Supplies or Services	23
Contract	24
Government Purchase Card	32
Blanket Purchase Agreement (BPA)	38

2. **Primary Forms:** SF-182, Request, Authorization, Agreement, and Certification of Training

3. **Related Forms:** None.

4. **Document Number:** Standard Number - unit assigned.

SAMPLE: 3004904FAB001

Document Type	FY Funded	Procurement Site	FY Contract Originated	Region	Program Elements	Document Sequence	Suffix
30	04	90	4	F	AB	001	

5. **Accounting Line:** If multiple accounting lines are used, a different suffix is required for each accounting line.

SAMPLE: 2/F/401/136/56/0/AB/12345/256C

6. **FINCEN Critical Processing Requirements:**

a. Completed SF-182's must be submitted to FINCEN. Units must ensure the following information is included to facilitate financial reporting:

(1) Student name and class attended - section A.

(2) Name and mailing address of training vendor - section B.

(3) Accounting data and cost - section C, block 21.

6. a. (4) Standard document number - section C, block 23.

(5) Approval signatures - section D

(6) Approval /concurrence – section E block 29a essential

(7) Correct Bill to Address in block 5: SF182 Invoices, USCG Finance Center, P. O. Box 4108, Chesapeake, VA 23327-4108.

b. COPY OF DOCUMENTS MUST BE LEGIBLE.

7. Other Information:

a. ALC 70-06-0000 must be placed in block 24 of the SF-182.

b. For tuition reimbursement using the SF-1164, see document type 33, Miscellaneous Costs in this Chapter.

8. FPD Information:

a. Obligation will transmit electronically via FPD.

b. A copy of the purchase form should be mailed to Interagency Agreements, USCG Finance Center, P. O. Box 4108, Chesapeake, VA 23327-4108 and should have the statement on the face of the document:

"OBLIGATION TRANSMITTED ELECTRONICALLY VIA FPD"

c. When transmitting to FINCEN, only the obligation accounting information (XA record) will be sent.

d. If this document is being prepared for a vendor other than another government agency to provide training the public/government indicator should be set to "P".

e. Standard generic input is made through the Miscellaneous Obligations Module.

f. No receiving report is required.

9. Document Flow:

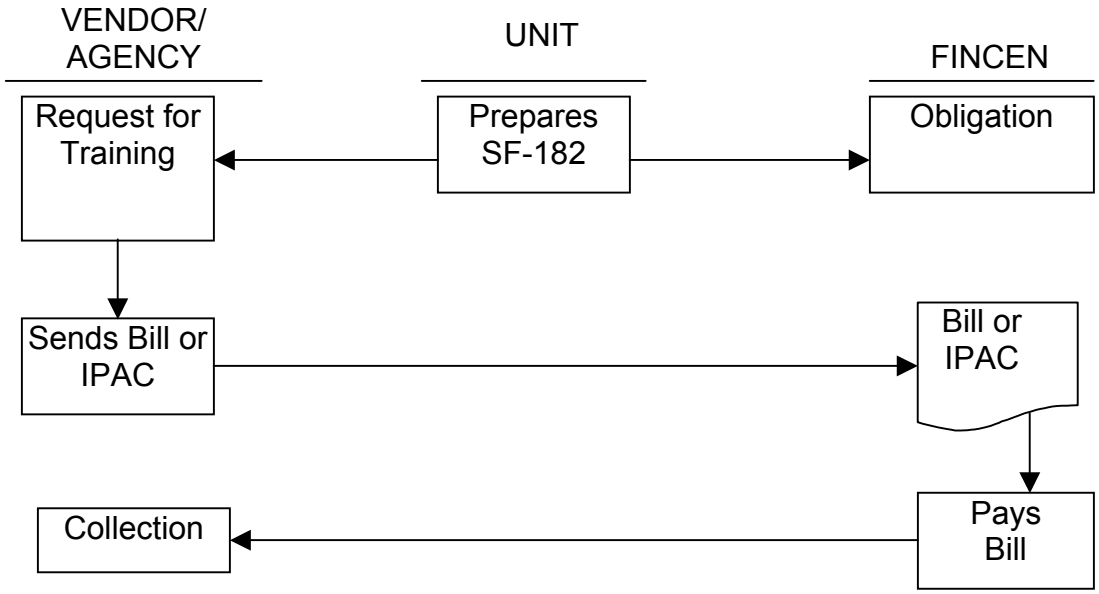

Figure 12D-45 Training

9. a. Figure 12D-45 describes the procedures for processing the SF-182 for training.

b. To request training, the target unit prepares the SF-182, Request, Authorization, Agreement, and Certification of Training.

c. One copy of the request is sent to the vendor/government agency, one copy is retained in the unit files, and one copy is mailed to SF182 Invoices, USCG Finance Center, P. O. Box 4108, Chesapeake, VA 23327-4108.

d. The FINCEN receives an IPAC bill from the civilian government agency and an invoice from all other vendors providing the training. IPAC charges are spread to the units.

e. No receiving report is required.

10. Sample Forms: See Figure 12D-46.

11. PES Report:

DOCUMENT ID	TRANS CODE	BATCH NUMBER	COST CENTER	OBJ CLASS	COMMIT	UNDELIVERED ORDERS	ACCRUED EXPEND	EXPEND
3004904FAB001000	051	94010FHAA	12345	256D	0.00	250.00	0.00	0.00
3004904FAB001000	102F	94029FH0J	12345	256D	0.00	250.00-	0.00	250.00

12. References: COMDTINST M4200.13F Simplified Acquisition Procedures Handbook.

Batch: 598174

REQUEST, AUTHORIZATION, AGREEMENT AND CERTIFICATION OF TRAINING

A. Agency, code agency subelement and submitting office number (Example - xx-xx-xxxx) 01

B. OFFICE USE ONLY

C. Request status (Mark (X) one) 02

X Initial or Resubmission | Correction or Cancellation

Section A - TRAINEE INFORMATION

1. Applicant's name (Last-First-Middle Initial): Fournier, David M.
Enter first 5 letters of last name 03: Fourn

2. Social Security Number 04

3. Date of Birth (Year and month) 05 (Example-born January 14, 1943 shown as 43/01)

4. Home address (Number, street, city, State, ZIP code): 53 Hawthorn Rd, Groton, CT 06340

5. Home telephone: Area code 860 405-1634

6. Position level (Mark (X) one only): X a. Non-supervisory; b. Supervisory; c. Manager; d. Executive

7. Organization mailing address (Branch-Division/Office/Bureau/Agency): USCG Academy (Dee), 27 Mohegan Ave New London, CT 06320

8. Office Telephone: Area code 860, Number 701-1634, Extension

9. Continuous civilian service: Years, Months

10. Number of prior non-government training days

11a. Position title/function: Electronics Technician

11b. Applicant handicapped or disabled (See instructions)

12. Pay plan/series/grade/step: E-6

13. Type of appointment

14. Education level

Section B - TRAINING COURSE DATA

15a. Name and mailing address of training vendor (No., street, city, State, ZIP code): The Training Camp, 1812 Marsh Rd. Ste. 200 Wilmington, DE 19810

15b. Location of training site (If same, mark box): Fernwood Resort, Rt. 209 Bushkill, PA 18324

16. Course title and training objectives (Benefits to be derived by the Government): Microsoft 2003 MCSE/MCSA: Security +

POSTED 11/7

17. Catalog/Course No.

18. Training period (8 digits) 06

	Year	Month	Day
a. Start	03	12	01
b. Complete	03	12	14

19. No. of course hours (4 digits) 07

a. During duty	
b. Non-duty	
c. TOTAL	0

20. Training codes (See instructions)

	Code		Code
a. Purpose	2	c. Source 08	4 10
b. Type	5	d. Special interest 09	0 11

AGENCY USE ONLY

Section C - ESTIMATED COSTS AND BILLING INFORMATION

21. Direct costs and appropriation/fund chargeable

Item	Amount Dollars	Cents	Appropriation/fund
a. Tuition	$ 7595	.00	2/Q/401/160/30/0/ FE/60509/~~[illegible]~~ 2562
b. Books or materials	0	.00	
c. Other (Specify)	0	.00	
d. (Enter 4 digits in dollar column) 12 TOTAL	$ 7595	.00	

22. Indirect costs and appropriation/fund chargeable

Item	Amount Dollars	Cents	Appropriation/fund
a. Travel	$ 150	.00	
b. Per diem	270	.00	
c. Other (Specify)			
d. (Enter 4 digits in dollar column) 13 TOTAL	$ 420	.00	

23. Document/Purchase Order/Requisition No.: 30043940FE006

24. 8-Digit station symbol (Example - 12-34-5678): 70-06-0000

25. BILLING INSTRUCTIONS (Furnish invoice to):
SF-182 Invoices
USCG Finance Center
PO Box 4108
Chesapeake, VA 23327-4108

Section D - APPROVALS

26a. Immediate Supervisor - Name and title: ETCS J.G. Sauls
Area code/Tel. No./Extension: 860-444-8545

b. Signature | Date

27a. Second-line Supervisor - Name and title | Area code/Tel. No./Extension

b. Signature | Date

28a. Training Officer - Name and title: LCDR Thomas Routhier
Area code/Tel. No./Extension: 860-444-8318

b. Signature | Date: 6 OCT 03

Section E - APPROVAL/CONCURRENCE

29a. Authorizing official - Name and title: Marcie Madsen
Area code/Tel. No./Extension: 860-444-8258

b. Signature | X Approved | Disapproved | Date: 11/6/03

Section F - CERTIFICATION OF TRAINING COMPLETION

30a. Certifying official - Name and title | Area code/Tel. No./Extension

b. Signature | Date

TRAINING FACILITY Bills should be sent to office indicated in Item 25. Please refer to number given in Item 23 to assure prompt payment.

Copy 1 - AGENCY (TRAINING/PERSONNEL FOLDER)

Standard Form 182 (Rev. 12/79) (10-Part)
U.S. Office of Personnel Management FPM Chapter 410

Figure 12D-46 SF-182, Request, Authorization, Agreement and Certification of Training