



# Oregon Roads Scholar Program

Sponsored by the Oregon Technology Transfer (T2) Center

## Elective Course Acceptance Form

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	T2 Coordinator Initials _____
Date _____	Class No. _____	Participant No. _____

Course Title \_\_\_\_\_

Date \_\_\_\_\_ Course Hours \_\_\_\_\_

Location \_\_\_\_\_

Instructor(s) \_\_\_\_\_

Description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach a training certificate or similar documentation as evidence of attendance.** Elective courses should be at least 4 hours in length, increase awareness and/or improve maintenance techniques beyond required job skills. Electives may also expand on the information presented in required **Roads Scholar** courses.

*Please print clearly*

\_\_\_\_\_ Last First Middle

\_\_\_\_\_ Agency Job Title

\_\_\_\_\_ Agency Mailing Address

\_\_\_\_\_ City Zip

\_\_\_\_\_ Agency Telephone Fax

\_\_\_\_\_ E-mail Address

**Return this form with course certificate by FAX (503.986.2844) to Bob Rath**