

**ISTC BAYTOWN TRAINING CENTER
SPECIAL CLASS REQUEST AND AUTHORIZATION**

I.S.T.C. shall provide the following classes at the request of:

Company Name: _____

Client I.D.: _____

Address: _____

Phone: _____ Fax: _____

After Hours Contact Name: _____

After Hours Contact Phone Number: _____

Classes Needed: _____

Date of Class: _____ Time: _____

- **Special request classes require the following student minimum charge.**

Basic Plus and Basic Plus Refresher – 10

Site Specific Classes – 20

Holiday hourly charge at \$45.00 per hour for actual hours required (minimum 2 hour charge).

If a Basic Plus class is scheduled and does not make, company will be billed a \$75.00 call out fee.

If a company calls in a request for training and fails to cancel the training or employees fail to show up for training, the company will be billed for the minimum cost.

I authorize ISTC to bill stated company for the minimum number of units required or for actual training units taken if greater than minimum number plus the holiday hourly charge (if applicable) or the call out charge for Basic Plus (if applicable).

Approved: _____

(Member Company Representative)

For ISTC use only

ISTC Approval _____

IT Department Notified _____

Classes Open _____

RETURN VIA FAX TO (281) 422-3008