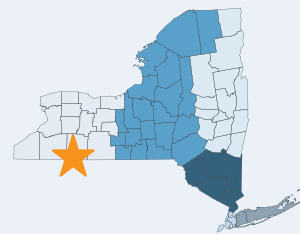


SKILLS FOR SUCCESS

Free Courses for CSEA-represented Employees



CSEA Western
Region 6



Carpentry Intermediate

Letchworth State Park, Castile
September 18 & 19, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5962



Workplace Social Skills

Western New York DDSO, West Seneca
October 1, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5952



Thriving in the Changing Workplace

Department of Transportation, Rochester
October 29, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5949



Successful Business Writing

Western New York DDSO, West Seneca
November 5, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5953



OSHA 10-Hour General Industry

Western New York DDSO, West Seneca
November 6 & 7, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5959



Air Conditioning and Refrigeration Basics

Western New York DDSO, West Seneca
December 5, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5960



Customer Service

SUNY Fredonia, Fredonia
December 10, 2024 | 9:00 a.m. - 4:30 p.m.
SLMS CLASS CODE: P_OE_R6_5951

Workforce Development Competencies Key



Computer Skills and
Technology



Critical Thinking,
Problem-Solving, and Math



Interpersonal and Customer
Relations



Professionalism
and Self-Management



Trades, Safety, and Risk
Management



Verbal and
Written Communication

Fall 2024 Courses Enroll Now!

Enroll through the Statewide Learning
Management System (SLMS) or by
using the application on the back.

Scan the QR code to search the entire
course catalog online.



APPLICANT INFORMATION

Please print or type.

Name	Signature
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New York State Government Employees, please provide your employee identification number (NYS EMPLID is 9 characters long, begins with "N," and can be found on your paystub, located to the left of "Pay Rate").

NYS Employee Identification Number or ID number: N _____

Local Government, School Districts, State Authorities, or Private Sector CSEA-represented Employees, please provide your CSEA ID (the CSEA ID is 10 characters long and can be found on your CSEA membership ID card).

CSEA ID: _____

<p>Negotiating Unit New York State Government Employees (select one):</p> <ul style="list-style-type: none"> 02 = Administrative Services Unit (ASU) 03 = Operational Services Unit (OSU) 04 = Institutional Services Unit (ISU) 05 = Professional, Scientific & Technical (PS&T)* 06 = Management/Confidential (M/C)* 47 = Division of Military & Naval Affairs (DMNA) <p>Other _____</p> <p>* As space permits.</p> <p>Non-state CSEA-represented Employee – If Local Government, School District, State Authority, or Private Sector CSEA-represented employee, check here <input type="checkbox"/></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Current Job Title</td> <td style="width: 50%;">Grade</td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black; padding-top: 5px;">Name of Agency or Organization</td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black; padding-top: 5px;">Facility</td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black; padding-top: 5px;">Day Phone</td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black; padding-top: 5px;">Email Address (Must provide at least one)</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Home:</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Work:</td> </tr> </table>	Current Job Title	Grade	Name of Agency or Organization		Facility		Day Phone		Email Address (Must provide at least one)		Home:		Work:	
Current Job Title	Grade														
Name of Agency or Organization															
Facility															
Day Phone															
Email Address (Must provide at least one)															
Home:															
Work:															

Reasonable Accommodation: All participants are welcome. If you have a disability and need an accommodation, check here . A Partnership staff member will contact you for further information.

COURSE INFORMATION

Course Title	Date	SLMS Class Code
1.		
2.		
3.		
4.		

SUPERVISOR APPROVAL

By signing this application I grant this employee release time, without charge to leave credits, to attend the course(s).

Supervisor Name (Print or Type)	Supervisor Signature	
Supervisor Email	Supervisor Phone Number	Date

Email to: learning@nyscseapartnership.org. Fax to: (518) 486-1989 or (518) 473-0056. Or mail to: NYS & CSEA Partnership
Corporate Plaza East – Suite 502, 240 Washington Ave. Ext., Albany, NY 12203

NOTE: Course registration deadlines are approximately two weeks before the first day of the class.