

MAJCOM MISSION TRAINING REQUEST (FY _____)

SECTION I. IDENTIFICATION DATA

1. UNIT	2. FUNCT. AREA	3. LOCATION	
4. COURSE NUMBER	5. TITLE	6. PDS CODE	7. NUMBER REQ.

8. BRIEF COURSE DESCRIPTION

9. LEVEL OF URGENCY

<input type="checkbox"/> Level 1 - MISSION ACCOMPLISHMENT Accomplishment of the Air Force mission objective will not occur if training requirement is not satisfied. Requestor(s) will fund their requirement(s) if not supported by AF funding.	<input type="checkbox"/> Level 2 - MISSION SUSTAINMENT Training required to maintain the Air Force's readiness posture.	<input type="checkbox"/> Level 3 - MISSION ENHANCEMENT Training that fosters the effective use of resources to improve the Air Force's mission capability.
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SECTION II. JUSTIFICATION DATA (Required for all levels)(Continue on reverse if needed.)

10. JUSTIFICATION TO SUPPORT LEVEL OF URGENCY(Level 1 request must state exactly how and why the unit mission objective will not occur if training is not provided. Justify the level of urgency indicated in block 9 and state what effect it will have on the unit's mission if training requirements are not satisfied. What specific task(s) won't be accomplished?)

11. POSSIBLE ALTERNATIVES AVAILABLE TO SATISFY REQUIREMENTS(State any possible alternatives available to satisfy training requirement (i.e., mobile training teams, local schools, private contractors, base developed course.)

12. REQUESTOR (Name/Rank/Duty Phone)	13. SIGNATURE	14. DATE
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SECTION III. CERTIFICATION (MANDATORY for Level 1 request. Certifies that block 7 and block 9 are accurate and valid.)

I certify this training requirement meets the criteria for the level of urgency specified above and if Air Force funding cannot support the request, unit funds will be APPROVED DISAPPROVED

15. CERTIFIER (Name/Rank/Duty Phone)	16. SIGNATURE	17. DATE
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AF IMT 3933 CONTINUATION SHEET