SF 4300-CRC (3-2017)

Supersedes (10-2016) issue

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**COMPLETION RECORD**

**FOR CONTRACTOR ADMINISTERED TRAINING**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | | |
|  | | | | | | | |
| Assigned Organization | | | |  | | SNL Employee/ID No. |  |
|  | | | | | | | |
| **Course No.** | | Course Title/Other Training Method | | Start Date | | End Date |
|  | |  | |  | |  |
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| --- | --- |
| **Purchase Order (PO)/Contract Number** |  |
| **Subcontracting Company Name** |  |
| **Lower Tier Subcontracting Company Name**  *(if applicable)* |  |
| **Contractor Manager Name** |  |
|  | ***Please Print*** |

*I certify that I have successfully completed this training.*

|  |  |
| --- | --- |
| ***Contractor’s Personnel*** |  |
|  | ***Signature Date*** |

*I certify that the above named person has successfully completed this training.*

|  |  |
| --- | --- |
| ***Contractor Manager*** |  |
|  | ***Signature Date*** |

*I acknowledge that the above named person was given the opportunity to ask questions.*

|  |  |
| --- | --- |
| ***Sandia Manager or Delegate:*** |  |
|  | ***Signature Date*** |

**Instructions for processing:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Contracting Company:*** | | ***Sandia Delegated Representative (SDR):*** | | ***Sandia Manager or Delegate:*** | |
| 1.  2.  3.  4. | Ensure completion of the form  Retain a copy for your records  Provide the original to your employee  If the agreement is a:  Human Resource Staff Augmentation contract (the Staffing Requisition originated in Human Resources), have your employee submit a copy to the **Sandia Manager**. It is required that initial ES&H Awareness (ESH100) and Computer Security Training (COM100) be reported.  Otherwise, have your employee submit the original to the **Sandia Delegated Representative**. | 1.  2.  3.  4.  5. | Ensure that the Sandia Manager acknowledged by signing this form  Ensure input into the Training and Employee Development System (TEDS) prior to the contractor starting work  Check with the appropriate training coordinator to verify the entry into TEDS is complete  The SDR should retain a copy of this form for audit purposes.  Attach the signed contractor form to the PO in Oracle and then send the original one to Sharon Gallegos [sgalle@sandia.gov](mailto:sgalle@sandia.gov); MS 0653 | 1.  2. | Answer questions the contractor’s personnel may have  Acknowledge by signing this form |

