



RISO Train the Trainer Certification Request Form

Dealer Name: _____ I.D.#: _____ Website: _____

Address: _____ City: _____ State _____ Zip/Post: _____

Phone: _____ Fax: _____ Email: _____

Primary Contact: _____

Thank you for your interest in the RISO In-House Technical Trainer Certification program. Please provide the required information below. Certification fee will be due when approved and billed automatically to your account. \$2000.00 Initial Application Fee \$500.00 Additional Series

Product(s) Applying For: _____

Applicant's Name: _____
PLEASE PRINT

Applicant Currently Certified By: _____
(List OEMs & Years Certification Held)

Include Copies of Training certificates _____

Do you currently have a training facility in operation at your location? Yes No

How many students and systems can you accommodate in this training facility?

Students _____ Systems _____

Training facility floor plan: width (ft) _____ length (ft) _____

Is there a Technical Support Center currently in operation at your facility? Yes_ No_

Authorized Signature _____

Date _____

Print Name _____

SUBJECT TO APPROVAL BY: *Please Initial*

DIRECTOR, TECHNICAL OPERATIONS _____
MANAGER TECHNICAL TRAINING _____
FINANCE _____
DEALER SALES _____

Submit via email to risotrainer@riso.com or fax to 978-560-1154
NOTE: This form requires Adobe Acrobat Reader 6.0 or higher.