

# Office of the State Controller

## Computer Based Training (CBT) Completion Form

**Complete this form and fax to Sue Rader at:  
919-431-6593**

**This form must be signed and dated by your supervisor.**

This form is to notify the Office of the State Controller that you have completed a Computer Based Training (CBT) course. You must complete specific CBTs for the following reason:

**NCAS Training:** You will be prevented from taking classes for which a Computer Based Training (CBT) course is a prerequisite.

To determine which classes have computer based training courses as a prerequisite, access the class outline through the Training Catalog located on the **State Information Guide (SIG)**. **Click on OR copy and paste the following link** to access the Training Catalog.

[http://www.ncosc.net/sigdocs/sig\\_docs/sigTraining.html](http://www.ncosc.net/sigdocs/sig_docs/sigTraining.html)

After the OSC receives your completed form, you will be allowed to attend any class for which a CBT is a prerequisite.

---

Yes, I have completed the **NCAS Basics CBT**

Yes, I have completed the **Information Access CBT**

Student Name: \_\_\_\_\_  
Last Name First Date

Student Signature: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_

Student Email: \_\_\_\_\_

Department/Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_  
Date