Submitting an Individual Civilian Training Request (SF182)

ArmyIgnitED – Civilian Education

https://www.armyignited.army.mil/student/account/login

Please ensure you have all required information before starting the SF182, as you will not be able to save your progress.

Access ArmyIgnitED Student Portal > Click 'Create SF182' from left hand menu.



Review Personal Information Incorrect information will delay the approval of your SF182.

- 1. Verify Accuracy of Supervisor Information, Civilian Personnel Data, and Contact Information /Address.
- 2. If incorrect, edit information using pencil icon. If correct, click 'Verify and Proceed.'

← Create SF 182					
Supervisor Information 🥜					
Verify that your supervisor's contact information is acc	urate. Your funding request document n	nay be disapproved if it i	is incorrect.		
First Name EducationGoalTest	Last Name Ellis ActiveTa				
Email Aaron.EllisActiveTa@bamtech.net	Alternate Email Aaron.EllisActiveTa@	ybamtech.net			
Phone Number (471) 037-7226					
Civilian Personnel Data 🥖					
Verify that the civilian personnel data is accurate. Your funding request ca	nnot proceed if certain fields are missing.				
Position Title SUPERVISORY ENVIRONMENTAL ENGINEER	Command Name SC		Organization US ARMY TANK CM	K-AUTOMOTIVE	AND ARMAMEN
Current Pay Plan NH	Occupational Series Code 0819		Civilian Pay Grade O4		
Career Field Construction, Engineering and Infrastructure	Appraisal Status Date		Pay Step 00		
Contact Information 🥟		Addre	ss 🥟		
Verify that the contact information is accurate. Your funding request cann	ot proceed if certain fields are missing.	Verify	that the address is	s accurate. Your fun	ding request cannol
Email First40.N.Last40@army.mil		Street 1 101 Mair	n Street		
Personal Email clayton.miller@bamtech.net		Street 2		Charles .	7
Work Phone 4783200442		Anywher	re	AL	39402
4783200442					

If your supervisor is not listed correctly, click the pencil icon and update the supervisor listed.

- 1. Search for your supervisor by typing in the correct name.
- 2. Select name from the drop-down menu.
- 3. Click 'Update Supervisor.'
- 4. Click 'Update Me.'

	4		
upervisor Informa	ation 🧷 🛑		
Verify that your superviso	r's contact information is accurate. Yo	ur funding request document may be disapproved if	i it is incorrect.
st Name ucationGoalTest		Last Name Ellis ActiveTa	
ail Iron.EllisActiveTa@bamt	ech.net	Alternate Email Aaron.EllisActiveTa@bamtech.net	
one Number 71) 037-7226			
Primary Superviso	or		
Supervisor information is	required for approval of most fund	ng request types.	
Having someone other tha be available to approve you commander of higher offic	n your supervisor approve your fund ur funding request then you must obt er).	ing request will be considered fraudulent and puni ain approval from a member of your chain of comr	shable under the UC/MJ. Exception: If the immediate supervisor will not mand (i.e. flight/section chief, superintendent, first sergeant or squadron
Type Supervisor Nan	ne 1	UPDATE SUP	ERVISOR
First Name		Last Name	
W Clayton Primary Email		Miller Alternate Email	
Clayton.Miller@bamted	ch.net	Clayton.Miller	@bamtech.net
Phone Number (184) 819-9197			
UPDATE ME			
Primary Super	ervisor	of most funding request types.	
Having someone other available to approximately the source of the source	her than your supervisor app ove your funding request the	rove your funding request will be consid n you must obtain approval from a men	dered fraudulent and punishable under the UCMJ. Exception: If the immediate supervis nber of your chain of command (i.e. flight/section chief, superintendent, first sergeant or
alderton	2		UPDATE SUPERVISOR 3
Kathryn Aldert	adet E3 Depry Post	nieuamtech.net	Last Name Miller
Kathryn Middl First43.N.Last	e43 Alderton-Civ, GS-14 43@army.mil	, W592AA,	Alternate Email Clayton.Miller@bamtech.net
Phone Number			
(104)017-717/			

Acknowledge the 'User Agreement' – Read fully, check <u>ALL</u> boxes to agree to the conditions, then click 'I Agree, Continue.'

← Create SF 182						
User Agreement						
In order to simplify the application process, you should be aware of or have the following information:						
Ensure your personal data in your ArmylgnitED profile is updated. This is crucial as any correspondence concerning your application will be sent via email.						
Application submission is not more than 170 days and not less than 30 days prior to class start date.						
If you need to apply for a course outside of the normal 170/30-day window, contact your respective Career Field Training Officer for assistance.						
Application submission does not constitute approval, all prerequisites must be meet prior to SF 102 submission.						
Request for training submitted without Supervisor and/or Training Officer approval will be automatically disapproved.						
You must agree to all conditions in order to submit this application for approval:						
I understand I must have an approved SF 182 prior to attending training. The SF 182 is the Army's official document for requesting, approving, and documenting training.						
I understand that if I attend a training event prior to receiving all approvals, I will be responsible for all associated training costs.						
I understand that it is my responsibility to ensure my grades are updated in ArmylgnitED.						
understand that if a grade is not posted to my ArmylgnitED dashboard after 45 days it will result in a "HOLD" being placed on my account. The HOLD will remain on my account until all applicable grades have been posted. I will not be able to submit additional training request until the HOLD is removed from my account.						
I acknowledge and authorize the release of my grades to the applicable Career Field Training Officer IAW 20 U.S.C. 1232g						
FINANCIAL						
I agree that no changes will be made to the direct cost of the training request without the approval of the Career Field Training Officer.						
I understand that the total amount of indirect cost is processed through the Defense Travel System (DTS).						
PRIVACY ACT STATEMENT:						
AUTHORITY: 10 U.S.C. 7013 and DeDI 1000.30						
PRINCIPAL PURPOSE: To process an individual's request for training funded by the Department of the Army Civilian Career Management Activity, via applicable Career Field. Use of the Department of Defense Common Access Card ID to make a positive identification of the individual and their records.						
ROUTINE USEs: Student grades may be provided by AI/Vendor and records may be disclosed to AI/Vendor for the purposes of verifying enrollment and billing information.						
DISCLOSURE IS VOLUNTARY: Disclosure of the Department of Defense Common Access Card ID is solely voluntary; however, failure to provide the information required may result in disapproval of the request for training.						
PENALTY STATEMENT:						
There are severe criminal output submitting false, fictitious, or fraudulent training requests and for requesting federal funding that duplicates course costs funded elsewhere.						
LAGREE, CONTINUE CANCEL						

Trainee Information: Select 'Position Level and Career Field.' Identify if special accommodations are needed, then select 'Next.'

Create SF 102							
1 Trainee Information			Vendor —				
Select a Position Level and Career Field							
Position Level* Manager	*	Construction, Engineering and Infrastructure (41494510)		*			
③ Description Does applicant need special accommodations? *							
O Yes							

Vendor Information: Please ensure the information matches the billing vendor information on the registration or invoice.

- 1. Enter Vendor name. (This is a leading search. Drop-down menu will appear as you type.)
- 2. Select Campus from drop-down menu.
- 3. *<u>Mandatory Information</u>* Enter Vendor Phone Number, E-mail Address, and Point of Contact. Website URL is not required.
- 4. Click 'Next.'

Create SF 182			
7 Trainee Information		2 Vendor	
/hat is your Vendor?			
The training vendor may be different from the billing vendor. En	r the billing vendor information that appears on the registration form or	invoice.	
ACADEMY COLLEGE 1			
ACADEMY COLLEGE- MAIN CAMPUS 2			
Street Line 1* 1101 East 78th St. Ste. 100	Street Line 2		
City* State* Minneapolis Minnesota	Zip* 55420		
Phone Number* 405-321-4561 3	Email Address* test@test.net		
•	Point-of-Contact*		

Course Information – Courses can be added to a training request in two ways, either by selecting the course from the course list or by adding the course manually.

1. Select from Course List – Search by subject or keyword > Click '+' to add course to training request.

← Create	≥ SF 182			
🕜 Trainee Inf	ormation	🖉 Vendor		3 Course
Subject	✓ Keyword			ADD COURSE MANUALLY BACK
	Code - Title	Level	Credits	Credit Type
~ +	ACCT100 - Accounting I	Undergraduate	3	Semester Hour
* +	ACCT101 - Accounting II	Undergraduate	3	Semester Hour
~ +	ACCT105 - Accounting for Non Accounting Majors	Undergraduate	3	Semester Hour
* +	ACCT202 - Introduction to Payroll	Undergraduate	3	Semester Hour
~ +	ACCT300 - Financial Accounting	Undergraduate	3	Semester Hour

- 2. Add Course Manually When adding a course manually, the following information is required:
 - Course Title
 - o Course Code
 - Number of Credits
 - Type of Credits

← Create SF 182			
Trainee Information	💋 Vendor		3 Course
Subject 👻	Keyword		ADD COURSE MANUALLY BACK
Code - Title	Level	Credits	Credit Type
✓ + ACCT100 - Accounting I	Undergraduate	3	Semester Hour

Once course information is selected or manually entered, complete all remaining required fields. Click 'Submit.'

← Create SF 182										
🥜 Trainee Information					🖌 Vendor					(3) Course
Training Course Data										
Course Title* Accounting			Course Number Code* ACCT 450		Training Start Date* 8/7/2023		Ē	Training End Date* 8/11/2023		Ē
Training Duty Hours* 40	Training Non-Duty Hours* 20		Training Purpose Type* New Work Assignmen	nt	② Description	Training Type Code* Basic Training Area	¥			
Training Sub Type Code* Adult Basic Education	Ŧ	Training Delivery Type Code Technology Based	° •	Training Designation Type Undergraduate Cree	Code* dit *	Training Credit* 16		Training Credit Type Code Semester Hours	×	
Training Accreditation Indicator *		Continued Service Agreeme No () Description	int Required Indicator*	¥	Training Source Type Code* Non-government		Ŧ			
No No										
Student/Membership ID* 56	Skill Learning Objective* Basic Knowledge								1	
Costs and Billing Information	15/100									
5 1000	8 Book and Material Costs* \$ 75		S O	nent Contribution Cost*	\$ ^{Travel*} 500		\$ 250			
BACK SUBMIT CANCEL										

Note: If creation/submission of the SF182 is within 30 days of the start date, it may not be approved due to time constraints. Course start and end date may be the same date.

See SF182 Agency Training Electronic Reporting Instructions (pp 4-9) for additional information.

After clicking "Submit," you will see a confirmation message informing you that your SF182 has been submitted. Your Supervisor, Training Officer and ACCMA will review and approve.

As your SF182 changes status, you will receive a message informing you of the progress.

