DoD Joint Inspector General Course Registration Form

Date of Request: _____   **JIGC Class # Requested:** _____   **Class Dates:** *From* _____ *Thru* _____

Applicant Information

(Please fill out the form completely and email it to JointIGRegistrar@dodig.mil, with the JIGC class # and dates in the subject line.
Failure to submit the requested information below may delay course registration or prevent course enrollment. Contact the course registrar if you have questions or do not receive acknowledgment of your registration within four weeks of the requested class start date.)
Ensure you have supervisory/command approval to attend the course before submitting this registration request.

Title: ____   **Name:** *(Last, First, MI)* _____ _____ ____   **Job Title/Position:** _____

Contact Info   ### Military   ### Civilian

Phone #: _____   **Branch:** _____   **Agency:** _____

Email: _____   **Grade:** ____ Rank: ____   **Grade:** _____

Prior IG Training   ### IG Experience   ### Mark Center Parking Request   ### Special Accommodations

Course Name: _____   **Yrs:** ____ *Mos:* ____   **Tag #:** _____

Date Graduated: _____   **Functions Performed:**   **State:** ____
Assistance
Inspections   **Rental:**
Investigations
Audits

Command/Agency Upon Graduation

Organization Type: Joint *(i.e. CCMD, Joint Staff, JTF, Joint Command)*   Agency *(i.e. DLA, DCMA, DCAA, DHA)*   Service *(i.e. Army, Navy, Air Force, Marine)*   Non DoD *(i.e. DoL, DoS, USAIDS)*

Organization Name: _____   **Report Date/EOD:** _____

Address: _____

City: _____   **State:** ____   **Zip:** _____

For more information on the DoD Joint IG Program, visit our website at http://www.dodig.mil/Programs/DoD-Joint-Inspector-General-Program/. Prior to your arrival, you should review the course handbook and Joint IG guides on our website.

___Notify the Registrar immediately if you need to cancel your request to attend the course___.
See our "untimely cancellation" policy in the Joint IG Course Handbook on our website.