

Division of Facilities Management and Construction (DFMC)

1011 Indian School Rd. NW, Suite 335

Albuquerque, NM 87104

Contact: iafmstraining@bia.gov



Maximo Class Registration Form

Date: _____

First Name: _____ Middle Name: _____

Last Name: _____ Job Title: _____

Bureau: BIA BIE OST Other

Have you been issued a PIV Card? - Yes ___ No ___

Are you a Federal Govt employee or Federal Govt Contractor? - Yes ___ No ___

Office Name: _____

Office Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Fax: (____) _____

Email Address: _____

Class Title: _____ Class Date(s): _____

BPERM

Supervisor Approval (Signature Required):	
I certify that the above student has received approval and will be available to attend class as requested.	
If class is full and there is a cancellation, DFMC will be notified at least 10 business days before the schedule class date.	
Approved by: _____	Date: _____
Signature: _____	
Supervisor Email: _____	
Title: _____	Phone: (____) _____

Cancellations / No Shows

We design our course to optimize your learning experience and therefore accommodates a limited number of participants. If you must cancel, please provide a written notification through email 72 hours before the training date.

DFMC Canceled Course(s)

If circumstances necessitate the cancellation of course(s) by DFMC, our staff will notify students by phone, fax or e-mail.

Please Return this Registration Form to imfastraining@bia.gov You will be notified as to your status for this class (slot available or waiting list).

**NOTE: There are no training fees. Participants are expected to attend each scheduled class with no early departures.
Please scan and send a current copy of your IT (FISSA) training certification!**

IA-FMS Pre-Training Questionnaire

Please email to: iafmstraining@bia.gov

Contact Information:

Name: _____ Date: _____

Work Address: _____

Phone Number: _____

Agency:	<input type="checkbox"/> BIA	<input type="checkbox"/> OJS	<input type="checkbox"/> BIE	BIE or OJS	
				<input type="checkbox"/> TRIBAL	<input type="checkbox"/> GRANT

Work Location/Site(s): _____

Job Title / Position: _____

Supervisor: _____

Supervisor's Phone Number: _____

I certify that the above student has received approval for the following government systems and will be available to attend class as requested:

Active Directory Bison System Access Management (BSAM) Information Management & Technology (IMT)

If class is full and there is a cancellation, DFMC will be notified at least 10 business days before the schedule class date.

Supervisor Approval: _____ Date: _____

Additional Information (Check all that apply):

Have you attended any IA-FMS Training? (If so, please explain below)	<input type="checkbox"/>
IA-FMS training attended: (Last time logged onto IA-FMS system?)	<input type="checkbox"/>
Do you have access to a computer with internet access?	<input type="checkbox"/>
Does your position require you to create or manage work orders for operations and maintenance activities?	<input type="checkbox"/>
Do you supervise facility management personnel?	<input type="checkbox"/>
Do you perform your duties for multiple locations?	<input type="checkbox"/>
Are you responsible for scheduling facility management personnel activities?	<input type="checkbox"/>
Are you involved in the Safety Inspection process at your location?	<input type="checkbox"/>
Are you involved in the Condition Assessment process at your location?	<input type="checkbox"/>
Are you involved in the Budgeting, Planning and Ranking process at your location?	<input type="checkbox"/>
Are you involved in determining the asset priorities (APIs) for facilities at your location?	<input type="checkbox"/>

Are you involved in determining the Current Replacement Values (CRVs) for facilities at your location?	<input type="checkbox"/>
About how often do you access IA-FMS? <input type="checkbox"/> Hourly <input type="checkbox"/> 1x/day <input type="checkbox"/> 1x/week <input type="checkbox"/> 1x/month <input type="checkbox"/> Never	
Please indicate what specific training, if any, you are seeking?	