

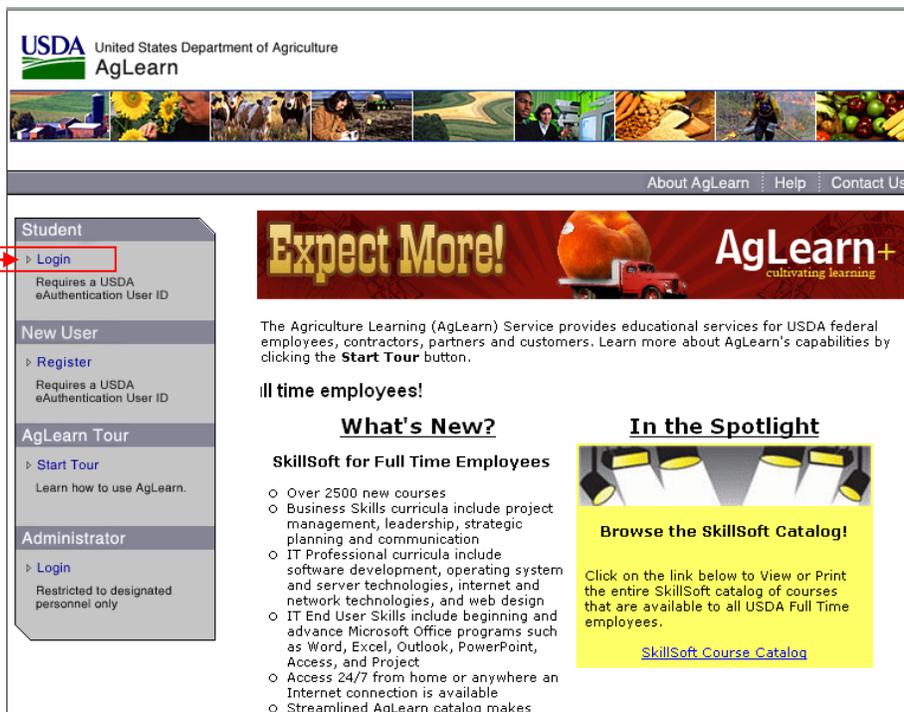
## AgLearn Electronic SF-182 – User Role

AgLearn provides an automated Authorization, Agreement and Certification for Training, SF-182 process that enables users to request training, provides review and approval authority for supervisors and other reviewers, and allows learners and supervisors to verify the training event. To take advantage of these features, you must first learn to complete a new SF-182 in AgLearn.

This quick start guide will show you how to:

Navigate to the SF-182 in AgLearn  
 Complete and submit a new SF-182  
 Review the status of your SF-182

1. Go to [www.AgLearn.usda.gov](http://www.AgLearn.usda.gov).
2. Log on under Student



3. Click on the Learning Tab
4. Click on SF-182 Requests
5. Click New Request at the bottom of the page

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### Request, Authorization, Agreement & Certification of Training

Below is a list of all of your External Training Requests. Click the Request ID for more information about the request. Select **Copy Request** or **Withdraw Request** from the Action drop down and click **Go** to Copy or Withdraw from an External Training Request. Click the **New External Request** button to initiate a new request.

Request ID	Title	Status	Pending Approval Actions	Action
18007	ADVANCED EXCEL	Denied	None	Copy Request Resubmit
18003	Power of Learning	Denied	None	Copy Request Resubmit
17936	Advance Power Point	Verified	None	Copy Request
17905	Delivering your message	Denied	None	Copy Request Resubmit
12554	ADVANCED EXCEL	Denied	None	Copy Request Resubmit

Viewing Options: All requests

**New Request**

- 6. The SF-182 form will open
  - 7. Complete blocks 2, 3, 6 as needed
  - Blocks 1, 4, 5 will be populated with name, address, and phone number.
  - Anything with a **RED \*** is a REQUIRED field
- Note: Block 4 – Home address – complete this field especially for OPM, FEI, and GSA courses)

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### Request, Authorization, Agreement & Certification of Training

Complete the form below in order to request training outside of your agency. Be certain to complete all of the required fields.  
Section A: Trainee Information

\* = Required Fields

**Request, Authorization, Agreement & Certification of Training**

<b>1. Applicant's Name</b>			<b>First Five Letters of Last Name</b>		<b>2. Social Security Number</b>	<b>3. Date of Birth.</b>
Last Name	First Name	Middle Initial	MAGIL		<input type="text"/>	<input type="text"/>
Magill	Ashley	B				
<b>4. Home Address</b>					<b>5. Home Phone</b>	<b>* 6. Position Level</b>
Street Address	City	State / Province	Postal Code	Country	<input type="text"/>	<input type="radio"/> a. Non-supervisory <input type="radio"/> c. Manager <input type="radio"/> e. Other
HRD REE SERVICES Bf	BELTSVILLE	MD	20705	USA		<input type="radio"/> b. Supervisory <input type="radio"/> d. Executive

8. Complete blocks 7 thru 14 with the appropriate information  
 Note: Block 9 – Work E-mail address – complete this field especially for OPM, FEI, and GSA courses)

7. Organization Mailing Address			8. Office Phone	9. Continuous Civilian Service	
Org Name	GWCC				
Add1	5601 Sunnyside Ave				
Add2			301-504-1476		
City	State / Province	Postal Code			
Beltsville	MD	20705			
11a. Position Title/Function	11b. <input type="checkbox"/> Applicant Handicapped or Disabled	* 12. Pay Plan/Series/Grade/Step	13. Type of Appointment	14. Education Level	
		GS/0303/05/03		4	

9. Complete blocks 15 thru 20 with the appropriate venter and course information.  
 Note: For instructions on information to be entered on the SF-182 (e.g. doc #, billing address), please go to <http://www.afm.ars.usda.gov/forms/EMPDEV/SF182-Instructions.PDF> to receive these instructions.

15a. Name and Mailing Address of Training Vendor					15b. Location of Training Site <input checked="" type="checkbox"/> If Same, mark box.					
* Name		If Other, please specify			Street Address		City	State / Province	Postal Code	Country
12. Graduate School, USDA (ITT)										
* Street Address	* City	* State / Province	* Postal Code	* Country						
600 MARYLAND AVENUE	WASHINGTON	DC	20024-	USA						
16. Course Title and Training Objectives (benefits to be derived by the Organization)										
17. Catalog/Course Number	18. Training Period		19. Number Of Course Hours		20. Training Codes					
			* a. During Duty: 8							
	* Start:	09/20/2007	* b. Non Duty:	0	* a. Purpose:	Improve Present Performance:	* c. Source:	Non-government:		
	* Complete:	09/20/2007			* b. Type:	Clerical (Non-supervisory):				

10. Enter the appropriate cost and billing information in Blocks 21 and 22  
 -Tuition, Books/Materials, Other, and Travel related expenses.

21. Direct Cost and appropriation/fund chargeable				22. Indirect Cost and appropriation/fund chargeable			
	* Amount	Employee Contribution	Appropriation Fund		* Amount	Employee Contribution	Appro
a. Tuition	0.00			a. Travel	0.00		
b. Books or Materials	0.00			b. Per Diem	0.00		
c. Other (Specify)	0.00			c. Other (Specify)	0.00		
d. Total				d. Total			

11. Complete Blocks 23 thru 25 as follows:

Block 23- Document/Purchase Order/ Requisition Number

Enter Document/Purchase Order/ Requisition Number for reimbursement of training costs to responsible Training Vender.

**Block 23-** Enter the Vendor Code (If you do not know the Vender Code contact your Vender Coordinator)

**Block 24-** Digit Station Symbol

Fill in 8-digit station symbol of the nominating Agency Finance Office for billing purposes. (ARS) 12-40-0300

**Block 25-** Billing Instructions

Enter name and mailing address of nominating Agency Finance Office for billing purpose.

**All ARS Offices, except for Beltsville Area, Pacific West Area, and Southern Plains Area**

USDA, OCFO  
 Controller Operations Division, ACPRB  
 ARS Operations Section  
 P.O. Box 53326  
 New Orleans, Louisiana 70153

**ARS-Beltsville Area-** USDA-ARS-BA-BARC-WEST

10300 Baltimore Ave  
 Rm. 301  
 Beltsville, MD 20705

**ARS-Pacifica West Area-** USDA-ARS-PWA

Area Finance Office  
 800 Buchanan St  
 Albany Ca, 94710

**ARS-Southern Plains Area-** USDA-ARS-SPA

1001 Holleman Drive, East  
 College Station, Texas 77840

23. Document / Purchase Order / Requisition No	24. 8-Digit Station Symbol
<input type="text"/>	<input type="text"/>
25. Billing Instructions	
<input type="text"/>	

12. After you have verified all the correct information, Click submit

Billing Instructions

Submit

13. **Step 1** – the supervisor’s name should already be populated from the user’s personal profile. Click the “show all” to show the supervisor name. If this process has not been followed, the user may conduct a search, however, the supervisor’s name should be populated via the personal profile.

### Approval Submission

**Submit for Approval**

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The item/request selected requires approval using the steps listed below.

Any steps that do not have a user listed must have a name filled in before the request can be submitted.

Approval Step	Approvers
Step 1	Supervisor Level 1 (Show All)
Step 2	Select User for Approver
Step 3	Approver 2
Step 4	Approver 3
Step 5	Approver 4
Step 6	Select User for Approver

14. **Step 2 & 5** – choose the “**Select User for Approver**” link to search for and add the name of the **Step 2 approver** and the **Step 6 approver**.

**Note:** **Step 3-5** will be “Auto-approvers” – the system will automatically move through these steps.

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**Add Peer Approvers**

Submit for Approval – [Search for Users](#)

**Search for Users to Add**

User ID:

Last Name:  Franklin

First Name:  M

Middle Initial:

Job Position:

Email:

15. After you have selected your "Approvers", Click Submit  
 - A confirmation of the course will appear.



16. To view the SF-182 you submitted

- Click on the Learning tab
- Go to the SF-182 tab
- The Request, Authorization, Agreement & Certification of Training screen appears. The status of the requested SF-182s and the pending steps are shown.

