



## Join Us for \_\_\_\_\_ Course

## Course Name

Course Description: ADD DESCRIPTION

Presented by: PRESENTER/DEPARTMENT NAME

Contact YOUR DEPARTMENT EMAIL

## DATE OF COURSE

00:00 - 00:00 AM/PM

REGISTER

[Right click on the register word in the square above and replace the hyperlink with your courses' hyperlink. Ask OD Coordinator to send this to you if you're unable to find this!]

Please share with colleagues who do not have a City-issued email address.

If you are in need of accommodations or have any additional questions, please contact Organizational Development prior to the course.

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https://www.cityofmadison.com/human-resources

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