

# Nutrition Class Request Form

Please email completed forms to: [elizabeth.l.phipps2.civ@health.mil](mailto:elizabeth.l.phipps2.civ@health.mil), or bring to the Nutrition Clinic, Building 7500, Room 1919 during regular business hours.

Office Hours: Monday – Friday 0800-1600

Office Closed for all Federal Holidays and Select Training Holidays

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**30-day advance notice is required for scheduling appointments. Requests requiring immediate attention may be accommodated on a case-by-case basis.**

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Date:

Requester Name:

Unit/Department:

Email:

Phone Number:

Date of Class:

Time of Class:

Length of Class:  30 minutes  60 minutes  Other, please indicate:

Address/Location/Parking Details:

**Class Topic (please select one of the following):**

- General Nutrition\*
- Performance Nutrition
- Other (please specify):

\*Please note: Soldiers enrolled in the Army Body Composition Program should attend the ABCP Class held on Tuesdays at 1430 at the Armed Forces Wellness Center.

Additional Notes/Requests:

Estimated Number of Participants:  Military  Civilian  Both

Technical Support Available (PowerPoint, Computer, Monitors):  Yes  No

This Portion to be Completed by NCD

Date Received:

Date/Time Class Scheduled:

Assigned To: