

AgLearn Electronic SF-182 – Employee/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.
2. Log on under Learner Login.

The screenshot shows the AgLearn website interface. At the top, there is a navigation bar with 'About AgLearn', 'Help', and 'Contact Us'. Below this is a 'Learner Center' sidebar with a red box around 'Learner Login' and a red arrow pointing to it. The main content area includes a 'Welcome to AgLearn!' message, 'Learning Resources' section with links to 'The Enhanced AgLearn Tour', 'The SF-182 Online Interactive Course', and 'The AgLearn Supervisor Online Interactive Course', and a 'Continuing Education' section with a list of partner organizations. On the right, there are three promotional banners: 'Start Planning Today for Tomorrow', 'Current SkillSoft Course Catalog', and 'We Won! Our commitment to building the best learning environment has paid off.'

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

USDA United States Department of Agriculture
AgLearn

Welcome Ashley Magill | About AgLearn | Contact Us | Home | Search Catalog [] Go | ? Help | Logo

Personal **Learning** Career Catalog Reports

Learning Plan Learning Calendar Current Registrations Curriculum Status Learning History Record Learning **SF-182 Requests**

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

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

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

Submit

Request, Authorization, Agreement & Certification of Training			
A. Agency Code, agency sub element and submitting office number			B. Request Status / Record Action
<input type="text"/>			<input checked="" type="radio"/> Add <input type="radio"/> Delete
A.1. Applicant's Name		First Five Letters of Last Name	
Last Name	First Name	Middle Initial	WALKE
Walker	Lyndell	A	
A.4. Home Address		A.5. Home Phone	* A.6. Position Level
Street Address		<input type="text"/>	<input type="radio"/> a. Non-supervisory <input type="radio"/> b. Manager
HRD- OFFICE OF THE DIRECTOR, 5601 SUNNYSIDE A		301-504-1396	<input type="radio"/> c. Supervisory <input type="radio"/> d. Executive
City	State / Province	Postal Code	Country
BELTSVILLE	MD	20705-5103	USA

8. Complete blocks A.7 thru A.17 with the appropriate information.

A.7. Organization Mailing Address			A.8. Office Phone	A.9. Work Email Address	
Add1	<input type="text"/>		<input type="text"/>	<input type="text" value="LYNDELL.WALKER@ARS.USDA.GOV"/>	
Add2	<input type="text"/>				
City	State / Province	Postal Code			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
A.10. Position Title	A.11. Does applicant need special accommodation?		If yes, please describe below		
<input type="text"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="text"/>		
A.12. Type of Appointment	A.13. Education Level	* A.14. Pay Plan	* A.15. Series	* A.16. Grade	A.17. Step
<input type="text" value="02"/>	<input type="text" value="9"/>	<input type="text" value="GS"/>	<input type="text" value="0299"/>	<input type="text" value="04"/>	<input type="text"/>

9. Complete blocks B.1a thru B.17 with the appropriate vender and course information.
 Note: **For instructions on how to complete the SF-182 (e.g. training codes, doc #, billing address), please go to <http://www.afm.ars.usda.gov/forms/EMPDEV/SF182-Instructions.PDF>.**

* Name <input type="text" value="-- Please Select One --"/>		If Other, please specify <input type="text"/>			
* Street Address	* City	* State / Province	* Postal Code	* Country	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
B.1b. Location of Training Site					<input type="checkbox"/> If Same, mark box.
Street Address	City	State / Province	Postal Code	Country	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			B.1c. Vendor Email Address	B.1d. Vendor Telephone Number	
			<input type="text"/>	<input type="text"/>	
* B.2a. Course Title	B.2b. Course Number Code	* B.3. Training Start Date (Enter Date as yyyy-dd-mm)	* B.4. Training Complete Date (Enter Date as yyyy-dd-mm)		
<input type="text"/>	<input type="text"/>	<input type="text" value=""/>	<input type="text" value=""/>		
* B.5. Training Duty Hours	* B.6. Training Non-Duty Hours	* B.7. Training Purpose Type			
<input type="text"/>	<input type="text"/>	<input type="text" value="-- Please Select One --"/>			
* B.9. Training Sub Type Code	B.10. Training Delivery Type Code	* B.11. Training Designation Type Code	B.12. Training Credit	* B.13. Training Credit Type Code	
<input type="text" value="-- Please Select One --"/>	<input type="text" value="-- Please Select One --"/>	<input type="text" value="-- Please Select One --"/>	<input type="text"/>	<input type="text" value="-- Please Select One --"/>	
* B.14. Training Accreditation Indicator	* B.15. Continued Service Agreement Required Indicator	B.16. Continued Service Agreement Required Expiration Date		B.17. Training Source Type Code:	
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	<input type="text" value=""/>		<input type="text" value="-- Please Select One --"/>	
B.18. Training Objectives			B.19. Agency Use Only		

10. Enter the appropriate cost and billing information in Blocks C.1 and C.2

-Tuition, Books/Materials, Other, and Travel related expenses.

Note: **For instructions on how to complete the SF-182 (e.g. training codes, doc #, billing address), please go to <http://www.afm.ars.usda.gov/forms/EMPDEV/SF182-Instructions.PDF>**

C.1. Direct Cost and appropriation/fund chargeable			C.2. Indirect Cost and appropriation/fund chargeable		
Item	* Amount	Appropriation Fund	Item	* Amount	Appropriation Fund
a. Tuition	<input type="text"/>	<input type="text"/>	a. Travel	<input type="text"/>	<input type="text"/>
b. Books or Materials	<input type="text"/>	<input type="text"/>	b. Per Diem	<input type="text"/>	<input type="text"/>
c. Total	<input type="text"/>		c. Total	<input type="text"/>	

11. Complete Blocks C.4 thru C.6 as follows:

Block C.4- Enter Document Number for reimbursement of training costs to responsible Training Vender. The **Document Number** is the 1st two digits of the FY, 4 middle digits from the accounting code/CRIS, and a 4 digit sequential number assigned by the office submitting the form.

Also in Block C.4 -

Enter the Vendor Code (If you do not know the Vender Code refer to the Vendor Coordinator list) -

<http://www.afm.ars.usda.gov/forms/EMPDEV/SF182-Instructions.PDF> - page 11

Block C.5- Fill in the 8-digit station symbol for ARS - **12-40-0300**

Block C.6- Billing Instructions - Enter name and mailing address of nominating Agency Finance Office for billing purpose.

Note: If paid by credit card, enter the card holders Name, Phone, and Email address. All payments over \$2500 must be paid through NFC.

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

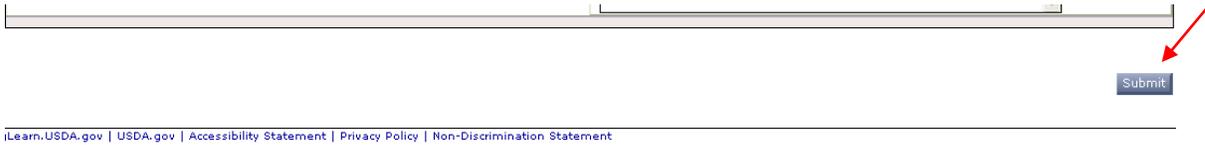
USDA-ARS-PWA
 Area Finance Office
 800 Buchanan St
 Albany Ca, 94710

ARS-Southern Plains Area

USDA-ARS-SPA
 1001 Holleman Drive, East
 College Station, Texas 77840

<p>C.4. Document / Purchase Order / Requisition No</p> <input style="width: 90%;" type="text"/>	<p>C.6. Billing Instructions</p> <div style="border: 1px solid black; height: 60px;"></div>
<p>C.5. 8-Digit Station Symbol</p> <input style="width: 90%;" type="text"/>	

12. After you review the form for accuracy and completeness, click **submit**.



13. The Approval Submission page appears.

14. **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	Approver 2
Step 3	Approver 3
Step 4	Approver 4
Step 5	Select User for Approval
Step 6	Select User for Approval

15. **Step 2-4** will be “Auto-approvers” – the system will automatically move through these steps.

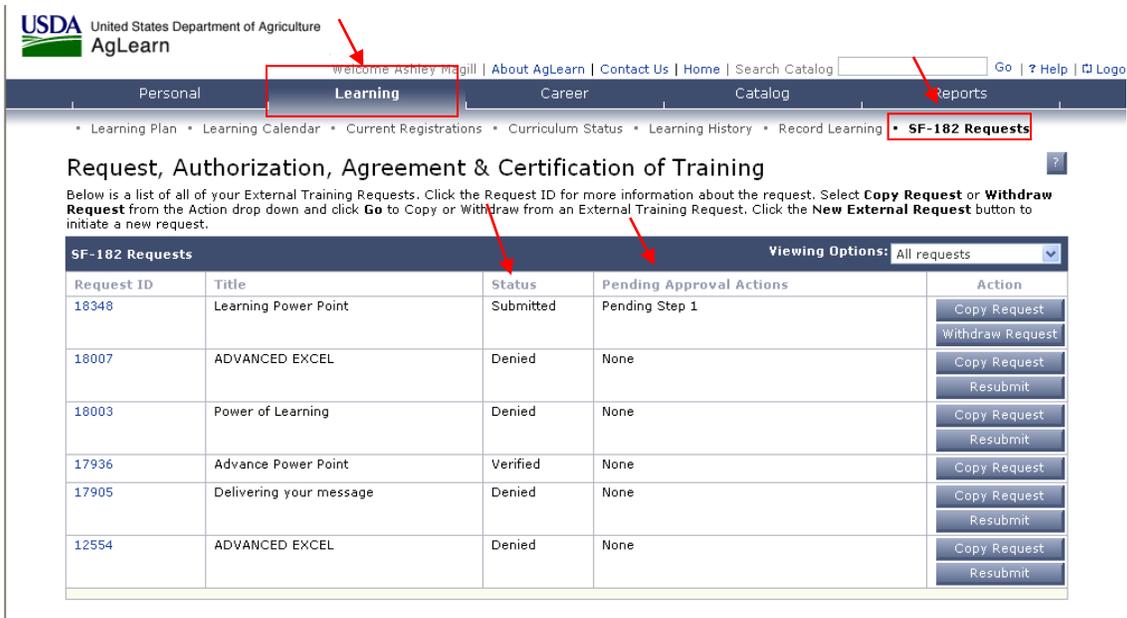
16. **Step 5 & 6** – choose the “**Select User for Approval**” link to search for and add the name of the **Step 5** approver and the **Step 6** approver.

A screenshot of the 'Add Peer Approvers' page in the AgLearn system. The page header includes the USDA logo and 'United States Department of Agriculture AgLearn'. A navigation bar shows 'Personal', 'Learning', 'Career', 'Catalog', and 'Reports'. Below the navigation bar, there are links for 'Learning Plan', 'Learning Calendar', 'Current Registrations', 'Curriculum Status', 'Learning History', 'Record Learning', and 'SF-182 Requests'. The main heading is 'Add Peer Approvers' with a help icon. Below it, there is a link 'Submit for Approval - Search for Users' and a 'Previous' button. A section titled 'Search for Users to Add' contains several search criteria: 'User ID', 'Last Name', 'First Name', 'Middle Initial', 'Job Position', and 'Email'. Each criterion has a 'Contains' dropdown menu and a text input field. A 'Search' button is located to the right of the input fields.

17. After you have selected your "Approvers", click **Submit**.
 - A confirmation of the course will appear.



18. To view the SF-182 you submitted:
- Click on the Learning tab.
 - Click on the SF-182 link.
 - The Request, Authorization, Agreement & Certification of Training screen appears. The status of the requested SF-182s and the pending steps are shown.



19. Once the form has been approved by all approvers, the user must print a copy of the form and provide a copy to whomever is responsible for ordering and paying for the training, faxing the document to NFC for payment.
Note: When paid by credit card, be sure card holder receives a copy.