## **Engine Operator Workshop Nomination Form**

Note: Only **COMPLETED** and **LEGIBLE** forms will be accepted!

*Nominee's Name:	
*C N 1 () 0 N () ( 1 )	
*Course Number(s) & Name(s): (courses cannot overlap)	Course Location:  Moab, Utah
	woad, Utan
*Agency (name and address-include district office name):	Training Officer's name, phone number and email address:
rigency (name and address merade district office name).	Truming officer 3 name, phone number and email address.
Working Job Title:	*IQCS # (Federal Employees Only):
*Work or Cell Phone:	*Supervicer's Name:
WOLK OF CELL PHOLE.	*Supervisor's Name:
*Fax Number	*Supervisor's Phone:
	F 5- 1-5
*E-mail Address:	*Supervisor's E-mail:
Do you meet all course prerequisites? """Yes """No	List training completed and dates <u>pertinent</u> to the course(s).
List your past experience <u>pertinent</u> to the course(s).	
PA	YMENT
Nominations WILL NOT be processed w	rithout completion of the attached payment form.
Tuition: \$40.00	
	Total \$
Upon submission of this form, you agree that you	will be charged for the course if you do not cancel by
April 5, 2013.	
Nominee's Electronic	Supervisor's Electronic
Signature:	Signature:
Contact Information	Please make a copy of this form for your records.
Contact Information	Only <b>complete</b> nominations will be accepted
Cherie Ausgotharp Phone: (801) 539-4130	• Payment must be faxed in immediately. Use attached
Utah Engine Workshop Fax: (801) 539-4097 o	credit card form.
P.O. Box 45155 (801) 539-4198	• This form must be a mailed to Charie Ausgothern
Salt Lake City, UT 84145-0155 E-Mail: causgoth@bli	II.gov
Federal Agency Nomination Form	Office Use Only
Federal Agency Nomination Form	□ PW □ Letter
Federal Agency Nomination Form	□ PW □ Letter
Federal Agency Nomination Form	□ PW □ Letter □ IQCS □ Paid □ Name Tag
Federal Agency Nomination Form	☐ PW ☐ Letter ☐ IQCS ☐ Name Tag ☐ Name Tag ☐ ☐ Name Tag ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐