

NOMINATION FOR A FHWA EMPLOYEE TO INSTRUCT NATIONAL HIGHWAY INSTITUTE TRAINING

Name of Instructor:			
Organization, Address, Telephone, E-Mail:			
I agree to make myself available to teach at least two (2) course sessions per year.			
Signature	Date		
Supervisory Endorsement:			
Based upon current job demands, I endorse to become an active NHI Instructor and understand that it could involve teaching at least two (2) course sessions per year.			
Print Name, Title			
Signature	Date		
List the NHI course(s) you are interested in instructing along with any qualifying experience.			
NHI Course Name or Number	Work/Training/Education Experience		
Please attach a current resume with this nomination.			





Office of Technical Services

List any course(s) you may have taught over the last	t two (2) years:		
List any national committees or work groups you ma	ay have served:	_	
Approved by Resource Center/Technical Lead:	YES	NO	
Approved by the Program Office:	YES	NO	
Training Program Manager:			
Print Name			
Signature		Date	

Please return this completed form along with the instructor's resume to NHIInstructorLiaison@dot.gov.