



## 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	ar.
Signature	Date
Oignaturo	
Supervisory Endorsement:	
	e an active NHI
Instructor and understand that it could involve teaching at least two (2) course ses	sions per year.
Print Name, Title	
Signature	Date
Signature	Date
List the NHI course(s) you are interested in instructing along with any qualifying e	xperience.
NHI Course Name or Number Work/Training/Education Experience	
Please attach a current resume with this nomination.	

List any course(s) you may have taught over the last to	wo (2) years:		
List any national committees or work groups you may	have served	:	
Approved by Resource Center/Technical Lead:	YES	NO	
	120	110	
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.