## **Engine Operator Workshop Nomination Form**

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

*Nominee's Name:				
*Course Number(s) & Name(s): ENOP N9018		Course Location: Camp Williams, 17800 S. Camp Williams Road, Bluffdale, UT 84065		
*Mailing Address: For pre-work (No P.O. Boxes)		Training Officer's name, phone number and email address:		
*Student's Agency & District Office Name:		*IQCS# (Federal Employees Only):		
*Working Job Title:		*Supervisor's Name/ Phone:		
*Student Phone:		*Supervisor's Email		
*Student E-mail Address:		*Any food allergies, or preferences (I.e gluten-free, vegan)?		
Do you meet all course pr (S130, S131, S190, S211 List your past experience p	, I100, 2-3 seasons on engine)	If yes, list below:		
Payment will be ac	PAY cepted via credit card	MENT		
uition: \$ All Students)			Total \$	
te cancellations not mad	e within 2 weeks of the cou	ırse start date will b	e charged full tuition.	
ominee's ignature:		Supervisor's Signature:		
Contact 1	Information	Please make a	copy of this form for your records.	
herie Ausgotharp tah BLM 00 S. 440 W. Suite 500 alt Lake City, UT 84101	Phone: (801) 539-4130 or (801) 554-3072 E-Mail: causgoth@blm.g	• Only complete accepted. • Payment = Cupon selection	Only complete/legible nominations will be	
ederal Agency Nomination Form		□ PW IQCS Paid Cancell	□ Name Tag ed □ Tent Card	