1-Date / /	**NOMINATION FORM** **LOCAL WORKFORCE DEVELOPMENT BOARD**	2-LWDA #

Nomination Forms must be submitted to the State and kept on file at the local level

Nominating Entity Information

3-Nominating Entity Name

4-Contact Person: 5-Contact Person Phone: ( ) -

Nominee Information

6-Nominated Individual's Name (Last, First)	7-Nominated Individual's Organization	8-City/County Representing (Enter N/A, if applicable)

Signature

9-Signature of Contact Person	/ / 10-Date

11-Title of Contact Person