



YEARS OF SERVICE RECOGNITION

The 2018 NINAETC/477 Executive Committee is requesting all Indian and Native American WIOA Section 166 and Public Law 102-477 grantees, if applicable, to submit names of staff members and board/council members who have attained twenty (20), twenty-five (25), thirty (30) and thirty-five (35) years of service in either or both roles *since May 2017*. These individuals will be honored during the 39th National Indian and Native American Employment / Public Law 102-477 Training, April 8-13, 2018 in Marksville, Louisiana.

Grantee: _____

	Name:	Current Position/Title:	(Mark both if apply):	Attending Conference
35 Years:	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
30 Years:	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
25 Years:	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
20 Years:	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/> Staff <input type="checkbox"/> Board/Council	<input type="checkbox"/>

Please submit this form to training@cimcinc.com or fax to (916) 641-6338. Use additional forms if needed.

Please submit names by March 23, 2018.