

MILITARY TRAINING NETWORK

INSTRUCTOR TRAINER (FORMERLY TSF) NOMINATION FORM

BLS

ALS

PALS

New Nomination

Re-Nomination

Instructions: To be completed and then approved by the Program Director. Instructor Trainer status must be renewed every two years. Send or fax a copy of this form to the MTN Program Manager; retain a copy in the instructor file along with a copy of the Instructor Trainer Card (both front and back) and CV.

Rank/Name/Title:			
Unit Name:			
Unit Mailing Address: (No PO Boxes)			
Commercial Work Phone:	DSN:	Fax:	
Duty E-Mail:		Alternate E-Mail:	
Commercial Command Phone:	DSN:	Fax:	
Command E-Mail:			

How Long has the Candidate been an Instructor?	
Expiration Date of Current Instructor/Instructor Trainer Card:	
List the Last Five Courses Taught Within the Last Two Years to Include Course Type and Date: Must Include one Instructor Course. Ex: COURSE NAME DDMMYY (BLS-R 30 SEP 13) COURSE NAME DD-DDMMYY (ACLS-P 12-13 APR 13)	

<p>MTN Instructor Trainer Commitment: As an MTN Instructor Trainer, I agree to conduct and follow the regulations set forth by the Military Training Network and the American Red Cross. I agree to maintain my instructor commitments in addition to fulfilling the responsibilities of an Instructor Trainer. I also agree to strengthen the Chain of Survival and the mission of the MTN and the American Red Cross within my community.</p>	
<p>_____ Signature of Instructor Trainer Candidate</p>	<p>_____ Date</p>

<p>Verification of Training Site Faculty Potential: (All Required)</p>		
<p><input type="checkbox"/> Has been identified as having Instructor Trainer potential during performance as an Instructor.</p>		
<p><input type="checkbox"/> Has demonstrated Instructor Trainer potential during a screening evaluation.</p>		
<p><input type="checkbox"/> Has demonstrated exemplary performance of Provider skills.</p>		
<p><input type="checkbox"/> Has had at least two-year's experience as an Instructor and has taught at least eight courses.</p>		
<p><input type="checkbox"/> Has served as a lead instructor or course director in at least one MTN course in respective discipline.</p>		
<p><input type="checkbox"/> For Re-Nomination only: has taught at least one instructor and four provider courses over the past two years</p>		
<p>_____ Name/Title</p>	<p>_____ Signature of Program Director</p>	<p>_____ Date</p>
<p>**Nomination and Re-nominations for Program Directors will be signed by the MTN Director**</p>		