

**NOMINATION ACCEPTANCE FORM  
FOR THE  
NATIVE AMERICAN EMPLOYMENT AND TRAINING COUNCIL**

I, \_\_\_\_\_ formally accept the  
(Nominee)

nomination to serve on the Native American Employment and Training Council, which is a two (2) year appointment, by the Secretary of Labor, for the Region or Sector of:

\_\_\_\_\_  
(Specify the Region or Sector, e.g. Region II, or Other Discipline- Tribal Leadership)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date