

FORM MUST BE SUBMITTED IN TYPED FORMAT. Handwritten copies will not be accepted.

## **CONTACT INFORMATION**

LEGAL NAME:			
COMPANY NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	
TELEPHONE: (OFFICE)	(CELL)		
E-MAIL ADDRESS:			
If applicable, please provide us with the following numbers:			

GENERAL CONTRACTOR'S LICENSE NUMBER

GENERAL CONTRACTOR'S QUALIFIER NUMBER

NCLBGC INSTRUCTOR ID NUMBER (TO BE ASSIGNED IN 2020)

**Note:** Approved Instructors who are also qualifiers shall receive one hour of CE credit for each one hour of class instruction. Provider is responsible for all CE fees for instructors seeking CE credit. It is your responsibility to inform the NCBI CE Coordinator of the courses which will apply. INITIAL HERE:

## **BIO – EDUCATION – EXPERIENCE**

You must include the following information: Education background (include specific general contracting education, if applicable); Experience in the General Contracting Industry; Professional licenses or certifications; Teaching experience if applicable, and number of years.

## **INSTRUCTOR CRITERIA**

Any Faculty Member approved by the Trustees of the North Carolina Builder Institute may teach an NCBI course, *HOWEVER*, in order to teach an *approved NCBI Continuing Education Course* you must also meet the following criteria:

- 1. You must attend and be approved by the NCLBGC to teach their Mandatory Course each year.
- 2. You must be able to teach both an NCBI 2-hour and 4-hour elective course.
- 3. You must provide all personal and course information required by the NCLBGC (NCBI Instructor Information Form and Course Approval Form), as applicable.
- 4. You MAY NOT promote yourself, your business, product or services either verbally or on course handouts during instructional course hours.
- 5. You must maintain and update your course content each year, as necessary, and submit any changes by the required date for approval by the NCLBGC (see NCBI Course Approval Guidelines)

## ATTACH PHOTO HERE

Or – email copy to dalford@nchba.org

**RETURN BY: Monday, December 16, 2019** 

TO: Deborah Alford
Director of Exhibitions & Education
North Carolina Builder Institute
P. O. Box 99090
Raleigh, NC 27624

EMAIL: dalford@nchba.org

Sign below to indicate you have read and acknowledge receipt of the information contained in this form and that the information you have provided is correct.

Instructor Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_