

PLEASE DO NOT ADD GRAPHICS, COVER SHEETS OR TABLE OF CONTENTS

**Fiscal Year 2025
National Summer Transportation Institute
Statement of Work**

<<College/University>> NSTI Transmittal Sheet

University/College Host Site

Host Site: <<College/University>>
Address (including zip): <<Address>>
Project Director: <<Name>>
Phone: << # >>
E-Mail: << e-mail>>

State Transportation Agency Liaison:

Name: JoAna McCoy
Title: Program Analyst
Phone: 919-707-2776
E-Mail: jmccoy5@ncdot.gov

Federal Highway Administration (FHWA) Division Office Representative

Name: Lynise DeVance
Title: Civil Rights Program Manager
Phone: 919-747-7010
E-Mail: Lynise.DeVance@dot.gov

The host site must complete this form and return it with its Statement of Work to the North Carolina DOT.

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**Fiscal Year 2025
National Summer Transportation Institute
Statement of Work Application**

SECTION A: PROGRAM INFORMATION

STATE ABBREVIATION:	NC	
STATE NAME:	North Carolina	
STATE DOT/PASSTHROUGH ENTITY:		
HOST SITE (SCHOOL NAME):		
CONGRESSIONAL DISTRICT NUMBER(S):		
SCHOOL HAS BACKGROUND CHECK POLICY? (YES/NO)		
FUNDS REQUESTED IN DOLLARS		
NSTI FUNDS:		
504E FUNDS (NHPP, STBG, HSIP, CMAQ):		
STATE/LOCAL FUNDS:		
IN-KIND CONTRIBUTIONS (MONETARY):		
ADVANCED CONSTRUCTION? (YES/NO)		
PERIOD OF PERFORMANCE (Start and end date) (MM/DD/YY):		
ANTICIPATED OBLIGATION DATE (MM/DD/YY):		
Is this a new NSTI? (Yes / No)		
Number of Years Hosting NSTI:		
Program Length for each Session I (<i>IN WEEKS</i>):		
Program Length for each Session II (<i>IN WEEKS</i>):		
Program Length for each Session III (<i>IN WEEKS</i>):		
Total # of Weeks (All Sessions Combined)		
PROGRAM DATES: (MM/DD/YY)	FROM	TO
Anticipated Number of NSTI Students:		
Total NSTI Program Length (<i>IN WEEKS</i>):		
FAA ACE Academy (<i>IN DAYS</i>):		
ACE Academy Location (<i>CITY, STATE</i>):		
Anticipated Number of ACE Students:		
SELECT PROGRAM TYPE (X):	Residential (<input type="checkbox"/>)	Non-Residential (<input type="checkbox"/>)
	Virtual (<input type="checkbox"/>)	Hybrid (<input type="checkbox"/>)
SELECT GRADE LEVEL (X):	Junior High School (or Middle; Grades 7-8; 7-9)	High School (Grades 9-12; 10-12)
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SECTION B: PROGRAM OVERVIEW

Host site must provide an abstract of how it plans to implement this year's NSTI program. (What, who, when, where, and how). *The abstract should address program objectives and include specific measures. Include a description of curriculum, specific field trips planned, and examples of planned enhancement activities and activity schedule. Exclude history information.*

SECTION C: PROGRAM ADMINISTRATION

1. Recruitment and Student Selection Procedures (*provide narrative*)
2. Staffing Requirements (Table-A)
3. Intermodal Advisory Committee (Table-B)
4. Specific-Named Partners (Table-C)
5. Implementation Plan - (Table-D)
6. Program Cost Excel Budget Spread Sheet (Table-E, PDFs not accepted)
7. Program (STEM-Focused) Curriculum; (*provide narrative*); must include activity schedule.
 - Academic
 - Enhancement
 - Sports/Recreation (only for residential programs)
 - Follow-up Survey of Students

Note: Please review your application to ensure it is accurate & complete the Excel budget spreadsheet.

Host Site representative with authority to APPROVE this Statement of Work (Type information):

Name: _____
Title: _____
Date: _____

The proposed work plan and budget has been reviewed. By signing this, we agree that this meets all the requirement identified in the most recent desk reference:

State DOT representative with authority to APPROVE this Statement of Work (Type information):

Name: JoAna McCoy
Title: Program Analyst
Date: _____

Internal Use Only

The Division Office has reviewed the Host Site package. The proposed SOW and all required supporting documentation has been reviewed. The submission is:

____ Recommended for approval.

____ Not recommended for approval.

Name: _____ Date: _____

Signature: _____

Civil Rights Specialist: Please convert this document to PDF and sign using YOUR electronic signature within Adobe.