**Nomination Form**

**2019 KAPA Driver of the Year OR Rookie of the Year Award**

**(Circle One)**

Company Name Driver Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOT # Driver Operates Under

1. Was the driver full time for at least six months from

October 1, 2018 – September 30, 2019 Y/N

1. Perfect attendance Oct. 1, 2018– Sept. 30, 2019

(No un-excused absences) Y/N

1. Any “at fault” accidents Oct. 1, 2018 – Sept. 30, 2019 Y/N
2. Does driver have any out of service violations on truck inspections? Y/N
3. Driver has good attitude regarding safety

(Please rate on a scale of 1-5, with 1 being “Excellent” & 5 being “Room for Improvement”

1. Driver keeps his/her truck clean

(Please rate on a scale of 1-5, with 1 being “Excellent” & 5 being “Room for Improvement”

1. Statement from supervisor and/or company representative stating “Why nominee should receive this Award. Please include driver’s community service work (tie breaker).
2. Days without accidents? \_\_\_\_\_\_
3. Please provide the driver’s motor vehicle license number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This information will be held in total confidence and destroyed after winner is declared).

**\*\*Please include picture of driver with his/her truck\*\***

I have read the criteria for the KAPA Driver of the Year Award and am satisfied the information submitted on the nomination form is correct. We proudly submit the individual listed above as our company’s nominee for this award.

/ /

Signature Title Date

Mail to: KAPA 800 SW Jackson St. #1408 Topeka, KS 66612

785-235-1188, Fax (785) 235-2544

email: phansen-nagy@kapa-krmca.org

**DEADLINE FOR NOMINATIONS – OCTOBER 31, 2019**