# **IDAHO DRIVER OF THE YEAR AWARD**

#### Sponsored by Hub International

Administered by the Safety Awards Selection Committee

Idaho Trucking Association

3405 East Overland Road/ Suite 175, Meridian, ID 83642

**RULES:**

1. The contest year is **January 1, 2022, through December 31, 2022.**
2. The contest is open to companies of all sizes including small owner/operators.
3. The driver must be employed by a member company of the Idaho Trucking Association.
4. Any member company may only nominate one applicant per contest year. The driver must have been employed by their current employer for the entire contest year.
5. The driver will be ineligible for this award if he/she has won within the last three contest years.
6. The winning driver will be nominated for ATA Driver of the Year Award.
7. The driver must be nominated for an outstanding deed of heroism or highway courtesy, for an outstanding contribution to highway safety, and/or for a long record of safe and courteous driving.
8. The driver can have no moving violations, crashes, or incidents within the contest period of **January 1, 2022, through December 31, 2022.**
9. A copy of the driver’s current **driving record** should be submitted with the application. The driving record will be used in conjunction with the application to verify accuracy.
10. Applications must be submitted on this official entry form and must be legible in order to be considered for the award.
11. The Safety Awards Selection Committee will use officially approved and established criteria to select the winner of the award.
12. Submissions are limited to this application, a 1–2-page narrative/synopsis of an experience, and a copy of the driving record or PSP. Additional documentation will not be considered.
13. Although this form is fillable, we will need the actual signature of the driver nominee and their company official.
14. Submission deadline is **To be determined**.

**Mail to:**

ITA Safety Awards Selection Committee

3405 East Overland Road/Suite 175

Meridian, ID 83642

**Fax to** 208.343.8397

**E-mail to:** **office@idtrucking.org**

## **CERTIFICATION AND AGREEMENT**

As a nominee for the “Idaho State Driver of the Year” program, and to be eligible for the award offered to the winner, I hereby certify:

1. All of the statements contained in the material in support of my nomination for the “Idaho Driver of the Year” award are true.
2. I will conduct myself in such a way as to protect and maintain the high status of the title “Idaho Driver of the Year” and I agree that the title may not be used in any advertising, promotion or exhibiting, except those sanctioned in writing by the ITA Safety Awards Selection Committee.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Nominee’s (driver) Signature

Date Click or tap here to enter text.

**As a company official, I certify:**

1. All statements contained in, and the material submitted herewith for this Idaho Driver of the Year nomination have been investigated and reviewed by representatives of this company, and are submitted in accordance with the rules set forth for the ITA/SMC “Idaho Driver of the Year” program.

 Signature of Company Officer

 Click or tap here to enter text. Click or tap here to enter text.

 Print Name Date

**Reviewed by: (ITA Office use only)**

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

Signature Date

**IDAHO DRIVER OF THE YEAR AWARD CANDIDATE INFORMATION**

**Name:** Click or tap here to enter text.

Home Address: Click or tap here to enter text.

Present Employer: Click or tap here to enter text.

Home Office Address: Click or tap here to enter text.

Your Terminal Address: Click or tap here to enter text.

**Year of Commercial Driving:**

 Total YearsClick or tap here to enter text.

 Years with Present Employer: Click or tap here to enter text.

**Total Mileage in Commercial Driving:** Click or tap here to enter text.

Is there a **driving record** attached? [ ]  Yes [ ]  No

Preferred shirt size: [ ] **XS** [ ] **S** [ ] **M** [x] **L** [ ]  **XL** [ ] **XXL** [ ] **XXXL** [ ] **XXXXL**

Please disclose any crashes/incidents/moving violations within the eligibility period: (regardless of fault) Click or tap here to enter text.

Normal route of operation: (long haul/short haul*)*  Click or tap here to enter text.

Type of equipment routinely operated: Click or tap here to enter text.

Certificates/Awards/Recognitions: Click or tap here to enter text.

**State** Truck Driving Championships: (list all state competitions, year, placement, awards, and company of employment at the time)

 Click or tap here to enter text.

**National** Truck Driving Championships: (list state, year, placement, awards and company of employment at the time)

Click or tap here to enter text.

Military Record:

 Branch of Service: Click or tap here to enter text.

 Dates: Click or tap here to enter text.

 Principal Duties: Click or tap here to enter text.

 Campaigns and Citations: Click or tap here to enter text.

Memberships to Lodges, Clubs, Associations or Organizations: (please list positions and year(s) held)

Click or tap here to enter text.

Volunteer experience and/or community involvement/hobbies or other activities:

Click or tap here to enter text.

**IDAHO DRIVER OF THE YEAR AWARD NARRATIVE**

Outline in detail the driver’s experience such as exceptional help to motorists, help at scene of accident, lifesaving or heroic efforts, etc.:

Click or tap here to enter text.

If you have any questions regarding the application, please call Idaho Trucking Association at 208.342.3521 or e-mail office@idtrucking.org.

**THANK YOU FOR YOUR NOMINATION, WE WISH YOU THE BEST OF LUCK!**