



FTA/SMC Safety Awards Competition

2017 DRIVER OF THE MONTH/YEAR NOMINATION

Nominations must be received in the FTA office by Friday, March 31, 2017.

Competition period for this awards program is January 1, 2016 – December 31, 2016.

WHO MAY SUBMIT NOMINATIONS: Any FTA member company may submit a nomination from their driver roster to the Florida Trucking Association for Driver of the Month.

DRIVER ELIGIBILITY: Nominees for the Driver of the Month/Year Award must be employed by or contracted to a member company of the Florida Trucking Association, and must have been continuously so employed or contracted for a least one (1) year prior to the nomination date. Nominees must also hold a valid Florida CDL.

REQUIRED DOCUMENTS: Failure to provide ALL of these items along with this FORM could disqualify your driver

- **MVR** – Minimum of seven (7) year or lifetime MVR. The MVR must be dated within 30 days of nomination. A three (3) year MVR will disqualify your driver.
- **Ring size** – This is very important. If selected as Driver of the Year, your nominee will receive a ring at the Awards Banquet.
- **Supporting documents** – Copies of documents such as newspaper articles, letters of recommendation, witness statements, accident reports, etc. are important to explain accidents and provide back up for awards and training assertions. Certificates of completion or participation must be included for training outlined in the application.

BASIS FOR SELECTION: The committee considers the following during competition judging:

1. Length of accident-free record (in years), with a minimum of at least one (1) year. This is measured in number of consecutive accident-free years prior to the application date.
NOTE: "Accident" for the purposes of this competition is defined as outlined as "DOT Recordable Accident" in the Federal Motor Carrier Safety Regulations (FMCSR) §390.5. "Accident-free" shall mean "free of all DOT Recordable Accidents, regardless of fault."
2. Attitude for doing an outstanding job over a long period of time.
3. Length of service as a driver with one (1) company.

MILEAGE CATEGORY: Drivers will be scored against their peer group by mileage and route classification. Choose ONLY ONE route classification (based on what most closely describes your driver's description):

1. **OTR/Long Haul** – Driver operating in an over-the-road environment who does NOT return to the same work reporting location each day.
2. **Local** – Driver operates both within a city and regional environment and returns to the same work reporting location each day.
3. **City/Peddler** – City driver who works within a single area or municipality, such as an LTL city or route driver, and returns to the same work reporting location each day.

CONTEST JUDGING: An independent panel of three judges drawn from the law enforcement, regulatory and trucking sectors will select the Driver of the Year. The decision of the judges will be final. There will be a two-tier selection process:

Tier One.....An FTA Safety Management Council judging committee will score all nominations and select twelve (12) Drivers of the Month.

Tier TwoThe twelve (12) Drivers of the Month will be required to complete a Driver Questionnaire for the Independent Judging Panel. This must be included in the initial nomination submission.

- Nominees will be evaluated based on their character; community standing; safety record; acts of heroism (verified by witnesses and material evidence of their act); or other activity which may have an effect on the judges' decision. Statements from insurance companies and/or the National Safety Council will be accepted as vouchers for accuracy of a driver's safety record.
- Individuals selected for Drivers of the Month will receive suitable recognition signifying the accomplishment. As soon as possible after the selection of Drivers of the Month, the Tier Two panel will review responses to the Driver Questionnaire and select one of those twelve to be Driver of the Year. The Driver of the Year will receive a trophy, driver's ring, and a gift from the FTA-SMC.

Note: The winner for any month shall be ineligible for competition for a period of three (3) years, and Driver of the Year shall be ineligible for competition for a period of five (5) years.

**Return forms no later than Friday, March 31, 2017, to:
FTA-SMC Safety Awards, Florida Trucking Association 350 E. College Ave., Tallahassee FL 32301**



Driver of the Month/Year

2017 NOMINATION FORM

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DRIVER NOMINEE INFORMATION

First Name Middle Name Last Name

Home Address

City State Zip

Florida CDL Number Ring Size

Home Phone Work Phone Cell Phone

DOB Age Nickname

Spouse Name Children & Ages Hobbies

PROFESSIONAL HISTORY/INFORMATION

CHOOSE ONLY ONE MILEAGE CATEGORY:(see page 1)

OTR/Line Haul Local City/Peddler

Number of miles driven annually Equipment operated (straight, 3-axle, etc.) Usual run

Preventable Non-preventable

Years as a CMV operator Total safe miles driven Number of lifetime DOT-Recordable Accidents

Preventable
 Non-preventable

Years with present company Total miles driven for company Date of last DOT-Recordable Accident

AWARDS RECEIVED AS A PROFESSIONAL DRIVER	DATE

COURSES OR TRAINING (Must provide copy of certificate)	DATE

SAFETY AND COMMUNITY SERVICE ACTIVITIES

OTHER CIVIC ACTIVITIES

CARRIER INFORMATION

Current Carrier

Date of Hire/Contract

Corporate Address

City/State/Zip

Terminal Address

City/State/Zip

PREVIOUS AFFILIATIONS

Company

Duties

Dates

Company

Duties

Dates

Company

Duties

Dates

CRIMINAL HISTORY (All misdemeanor or felony convictions)

DATE

TRAFFIC CITATIONS (list all MVR citations other than parking)

DATE

ACCIDENT REPORT – Please complete for last four (4) DOT recordable accidents

Driver Name

Current employer

ACCIDENT #1 (Most recent)

Date:

Location:

Truck
 POV

Number/persons injured:

Number of fatalities:

Preventable
 Non-preventable

Describe accident:

ACCIDENT #2

Date:

Location:

Truck
 POV

Number/persons injured:

Number of fatalities:

Preventable
 Non-preventable

Describe accident:

ACCIDENT #3

Date:

Location:

Truck
 POV

Number/persons injured:

Number of fatalities:

Preventable
 Non-preventable

Describe accident:

ACCIDENT #4

Date:

Location:

Truck
 POV

Number/persons injured:

Number of fatalities:

Preventable
 Non-preventable

Describe accident:

★ TOTAL NUMBER OF ACCIDENTS	<i>Award period</i>	<i>Lifetime</i>
DOT accidents as defined in 49 CFR §390.5 while driving trucks:		
Accidents while driving personal vehicle:		

NOMINATOR STATEMENT – Why should this driver be considered for Driver of the Month/Driver of the Year?

Consider: 1. Driver's concern for the industry's image; 2. Driver's commitment to safety; 3. Driver's record as a safety leader

Driver may be nominated for outstanding deed or heroism or highway courtesy, contribution to highway safety, long record of safe and courteous driving, etc. Specific information supporting the nomination—including dates, locations, and persons involved, as well as letters or other documents—should be attached. ***Use additional pages as necessary.***

DRIVER RELEASE, CERTIFICATION AND AGREEMENT

- A. I hereby authorize the Florida Trucking Association (FTA) to obtain the following information in connection with my application for the FTA-SMC Safety Management Awards Program: criminal and/or motor vehicle records (from the Florida Dept. of Highway Safety and Motor Vehicles, Federal Bureau of Investigation, or consumer reporting agency), employment records, educational records, consumer reports, personal references and other job related data provided on this application or via the interview process. I acknowledge that FTA-SMC has informed me that it may make use of this information in evaluating my application for recognition. I hereby authorize FTA-SMC to make use of the above referenced information and release FTA and any entity that provides information to FTA from liability in connection with this information.
- B. I certify that all the information I have provided on this form is true and complete to the best of my knowledge. I understand that giving false information or omitting requested information could result in rejection of my application or revocation of award.
- C. In consideration of my being allowed to participate in this program of the Florida Trucking Association Safety Management Council, and to be eligible for any awards and recognition offered in this program, I hereby certify and agree to the following:
1. All of the statements contained in the material submitted in support of my nomination are true. I authorize the Florida Trucking Association and its representatives to make an independent check of all information contained herein.
 2. I authorize the Florida Trucking Association to use the above-described information about me and photographs subsequently taken under FTA direction in publicity and advertising activities. I further agree to make myself available for publicity arranged by the Florida Trucking Association with newspapers, magazine writers, and radio and television journalists.
 3. I understand and agree that I will travel to and attend the annual FTA SMC Awards Banquet, or such other place or places, at such time or times, as arranged by the Florida Trucking Association, if chosen as a finalist or winner in this awards program.
- D. I will conduct myself in such a way as to protect and maintain the high honor bestowed upon me, and I agree that this recognition may not be used in any advertising, promotion, or exhibition except those sanctioned in writing by the Florida Trucking Association.

Driver Signature

Printed Driver Name

Date

COMPANY RELEASE, CERTIFICATION AND AGREEMENT

In consideration of our driver being allowed to participate in this program of the Florida Trucking Association Safety Management Council, this company does certify and agree to the following:

1. All of the statements contained in the material submitted in support of this driver's nomination are true to the best of the company's knowledge. These statements have been investigated by the company to the best of its ability, and a company representative has personally reviewed with the driver the facts contained herein.
2. It is understood and agreed to by the company that our driver will travel to and attend the annual FTA SMC Awards Banquet, or such other place or places, and at such time or times, as arranged by the Florida Trucking Association, if chosen as a finalist or winner in this award program.
3. It is agreed that should our driver receive the title "FTA Driver of the Year," the company will work to protect and maintain the high status of his/her recognition and will not use the recognition in any advertising, promotion or exhibition except those sanctioned in writing by the Florida Trucking Association.

The driver interview and investigation of the facts submitted in support of this nomination have been made by:

Name of company representative

Signature

Date

Company

Phone

Email

Address

City, State, Zip



Driver of the Month/Year

2017 TRACKING / CHAIN OF CUSTODY FORM

Driver Name

Current employer

DRIVER NOMINEE INFORMATION	<i>Important! Please initial& date chain of custody below</i>					
	Company Initial	Date Submitted	FTA Receipt	Date Received	SMC Review	Date Reviewed
Nomination Form(8 total pgs)						
Nominator Statement (pg 6)						
Driver Questionnaire (pg 7)						
MVR (pulled in past 30 days)						
Ring Size (pg 2)						

Supporting Documents (if applicable):

Important! Please list the number of pages included for each item in the left column

Packet includes:	Company Initial	Date Submitted	FTA Receipt	Date Received	SMC Review	Date Reviewed
Newspaper articles						
Recommendation letters						
Witness statements						
Accident reports						
Certificates/completion						
Certification documents						
Other (please list):						

Office Use Only – Record history of contact/follow-up with nominator here: