

2018 Driver of the Year Award

Your driver could be the next National Driver of the Year!

Thanks to our outstanding member drivers, twice in the past ten years, New York's Driver of the Year has gone on to be named the National Driver of the Year. Your driver could be next!

1

Every year, the Trucking Association of New York accepts nominations from member companies for the New York State Driver of the Year Award.

Drivers with outstanding driving records, who display their professionalism both on and off the road are considered for this prestigious award. Winners often are very involved in their community, through safety education or other civic or charitable pursuits.

2

Up to two drivers from each of the state's five regions are named as Regional Drivers of the Year, while one driver is selected as Statewide Driver of the Year. Any applicant who has won the overall state title in the past two years is eligible only for the regional title.

3

Filling out the nomination form is simple and pays excellent dividends. Press releases will be issued to the media in both the companies' and drivers' cities. This is the type of publicity this industry needs and benefits any fleet!

4

An awards presentation for Driver of the Year winners will be held on:

**June 8, 2019
at the NYS Truck Driving
Championships & Step Van Competition
Marriott Syracuse Downtown,
Syracuse, NY**

**The NYS Driver of the Year
will be nominated for the
American Trucking
Associations' National
Driver of the Year award!**



Contact TANY at
(518) 458-9696, or

kate@nytrucks.org with any
questions.

Submission Deadline : April 12, 2019

2018 TANY DRIVER OF THE YEAR AWARD Nomination Form

Send completed nomination forms by **April 12, 2019** to:
 Trucking Association of New York
 7 Corporate Drive, Clifton Park, NY 12065
 Phone: (518) 458-9696 Fax: (518) 458-2525 Email: kate@nytrucks.org

PERSONAL INFORMATION

Driver's Name: _____ **Email:** _____

Home Address: _____
 Street City State Zip

Company Name: _____ **Terminal Location:** _____

Address: _____
 Street City State Zip

SAFETY INFORMATION

Driving Experience

Number of years CMV driving: _____ Number of years with present employer: _____

Type of Driving: Local/Peddle Over-the Road Other: _____

Equipment Operated: Truck Tractor/ Trailer Other: _____

Total miles accumulated: _____ Present Employer
 _____ All Past Employers
 _____ Total

Accident History

Accident Type:	Date of Last:	# Preventable	# Non-Preventable	Total
DOT Reportable Accidents				
Company Accidents/Incidents				
On-the-job Lost Time Injuries				

Additional Information *(Be as complete as possible. Use additional paper if necessary.)*

Industry awards (Company awards, Truck Driving Championships, etc.): _____

Community involvement and hobbies: _____

Reasons this candidate deserves this award: _____

PLEASE NOTE: To be considered, nomination forms must be submitted with a written description of all accidents and injuries reported and a current Motor Vehicle Record.

Certification: All of the information submitted is accurate and true to the best of my knowledge.

 Name of Company Official (please print or type)

 Signature of Driver

 Signature of Company Official

 Company Telephone Number

 Title

 Company Official Email Address