

2023 Driver of the Year

Nomination Form for State Driver of the Year

Driver's Name _____

Company Name _____

BASIS OF NOMINATION. A driver may be nominated for a long record of safe and courteous driving, an outstanding deed of heroism or highway courtesy, and/or for an outstanding contribution to highway safety. It is preferable that the driving record be used in conjunction with one of the other acts mentioned. Be sure to give all pertinent information regarding this nomination using the following Driver Information Sheet, which should be filled out completely (if additional space is needed, continue on separate sheet & attach) and **return to renee@lmta.la by February 10, 2023.**

Driver Certification and Agreement

In consideration of my being allowed to participate in the Louisiana Motor Transport Association's Driver of the Year Program and to be eligible for the awards offered to the winner or winners, I hereby certify and agree to the following:

1. All of the statements contained in the material in support of my Nomination for the Driver of the Year are true.
2. I will always conduct myself in such a way as to protect and maintain the high status of the title "Driver of the Year" and I agree that the title may not be used in any advertising, promotion, or exhibition except those sanctioned in writing by the Louisiana Motor Transport Association, Inc.
3. I currently possess a valid Commercial Drivers License issued from my state of residence.

Witness _____
Company Official

Nominee's Signature

Date _____

Nomination forms due to Renee Amar renee@lmta.la by February 10, 2023!



DRIVER INFORMATION SHEET

Personal Information

Name _____ Age _____

Home Address _____

Married? _____ Spouse's First Name _____

Children? _____ Names & Ages _____

Memberships (*Lodges, Clubs, etc.*) _____

Military Record

Length of Service _____ When _____

Branch: (*Circle One*) Army Navy Air Force Marines Coast Guard

Principal Duties _____

Campaigns _____

Citations _____

Truck Driving Experience

Employer _____ Phone _____

Mailing Address _____

Home Terminal Address _____

Years of Commercial Driving: Present Employer _____ Previous Employer _____

Total Mileage: Present Employer _____ Previous Employer _____

No-Accident Record: Years _____ Miles _____

Date of Last Chargeable Accident _____

Usual Run (*If local, so state.*) _____

Type of Equipment Regularly Operated: Truck _____ Tractor-Trailer _____ Twins _____

First Aid Certificates _____

Truck Driving Championships (*TDC*) Competition (*National, State, Company*) -Years, Awards:

Union _____ Local No. _____ City _____

Outline in detail any unusual experience such as help to motorist, help at scene of accident, etc. other than those shown on Basis of Nomination. (*Attach additional sheet if necessary.*)
