

2017 MMTA DRIVER OF THE YEAR PROGRAM RULES & INFORMATION SHEET

Nominations are now being accepted for the seventh Annual MMTA Driver of the Year Program.

The MMTA Driver of the Year Program has been developed to recognize the individual, whose professionalism behind the wheel, as well as in the community, is an attribute to not only their company, but also, the transportation industry.

There are many excellent truck drivers working in the transportation industry and throughout the Commonwealth of Massachusetts. Many of these drivers work for your company but have never received the recognition they deserve. Studies have revealed that truck drivers seek respect and professional recognition for their accomplishments. Why not take a few minutes to nominate your finest driver(s) for this award?

REQUIREMENTS

1. Driver must be nominated by an MMTA member company, where they have driven for at least two years. The nominee must have a current, valid MA Commercial Driver's License.
2. Driver must **live** and **work** in Massachusetts.
3. A photocopy of the nominee's CDL and recent Motor Vehicle Report (less than 3 months old), must accompany the nomination form.
4. MMTA member companies may nominate as many drivers as they wish, as long as the nominee meets the requirements. Nomination forms may be duplicated as needed.
5. Nomination forms must be COMPLETE. Forms with missing information (years of service, miles traveled, accident info, and traffic citations, etc.) will not be considered.
6. **NOMINATION DEADLINE!** The MMTA office must receive the required information (by mail or fax) no later than **Friday, April 7, 2017**. 12 Post Office Square, 6th Floor Boston, MA 02109. Fax 617.695.0533

IMPORTANT – Previous winners are not eligible to participate again for this award.

Checklist:

- _____ 1. Driver Nomination & Information Form
- _____ 2. Accident Record
- _____ 3. Photocopy of current MA CDL
- _____ 4. Photocopy of MVR (less than 3 months old)
- _____ 5. Supporting documentation/statements (optional)

Driver Nomination & Information Form

Nomination Deadline: Friday, April 7, 2017

Information must be furnished for each item on both pages of this form. If the information requested does not pertain, draw a line to indicate that the item has not been overlooked. The form must be signed by the driver and by a company official.

Driver's Name _____ **Age** _____

Commercial Driving Experience: Total Years _____ Total Miles _____

Accident Record: Total accidents _____ Total preventable accidents _____

Type of equipment regularly operated (i.e. flatbed, tanker, etc.) _____

Usual Run: Road _____ Local _____ turn around _____ peddle _____ annual mileage _____
from _____ to _____

Awards received as a professional driver (other than no-accident awards)

Truck Driving Championships (if more room is needed, attach a separate piece of paper)

COMPETITION	CLASS	PLACE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Courses or schooling on first aid, driver education, safety (show type of course, date and sponsor i.e Highway Watch, Smith System Defensive Driver's program, etc.)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Show safety activities engaged in (such as neighborhood projects, civic programs, and give dates and brief description i.e. No-Zone demonstrations,) _____

Driver Nomination & Information Form

Military record: branch of service _____ dates _____ principal duty _____
Campaigns and citations (send supporting documents with nomination)

Memberships: church, lodges & clubs (offices held, if any)

Other activities and hobbies _____

Married? _____ Spouses name (if applicable) _____
Children names (if applicable) _____

Present employer _____ date employed _____

Main address _____

Terminal address _____

Union _____ local # _____ city _____

Driver's home address _____

Previous employment (in reverse)

Company	address	dates
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1. _____
2. _____
3. _____

Police record (list all convictions other than minor traffic violations, but include speeding, reckless driving, etc.- place, date, and sentence):

I certify that the information furnished on this “driver information & nomination form” is correct and true.

Signed: _____
(Driver's signature)

The information furnished on this form has been reviewed by me and compared with company records on this driver. I certify the information herein is correct to the best of my knowledge.

Signed: _____
(Company official)

Accident Record

Nomination Deadline: Friday, April 7, 2017

Driver's name _____

A. List required information for last four accidents in which driver was involved:

Accident #1 Date _____ Property damage cost _____
Number of persons injured _____ Number of fatalities _____
Type of vehicle driver was operating: truck _____ car _____
Accident classified as: preventable _____ non-preventable _____

Accident #2 Date _____ Property damage cost _____
Number of persons injured _____ Number of fatalities _____
Type of vehicle driver was operating: truck _____ car _____
Accident classified as: preventable _____ non-preventable _____

Accident #3 Date _____ Property damage cost _____
Number of persons injured _____ Number of fatalities _____
Type of vehicle driver was operating: truck _____ car _____
Accident classified as: preventable _____ non-preventable _____

Accident #4 Date _____ Property damage cost _____
Number of persons injured _____ Number of fatalities _____
Type of vehicle driver was operating: truck _____ car _____
Accident classified as: preventable _____ non-preventable _____

B. Show total number of accidents, and submit a copy of reports for each, which resulted in injury, fatality or property damage of \$250.00 or more:

Total while driving trucks _____ total while driving car _____