

Trucking Association of New York

2023 DRIVER OF THE YEAR AWARD APPLICATION

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 are often very involved in their communities, typically through safety education, civic engagement, or charitable pursuits.

How It Works

The top five drivers from throughout New York State are selected as finalists who are then invited to attend the Awards Banquet with a guest on June 8, 2024 in Syracuse, NY where one will be announced as the Statewide Driver of the Year.* Finalists will receive an award and a \$100 cash prize. The statewide winner will receive an award, a \$500 cash prize, and will be invited to attend the Annual Management Conference with a guest where they will be honored at the recognition banquet. A complimentary hotel room for two nights and registration for two people to the conference will be provided.

The Statewide Driver of the Year is eligible to be nominated for the American Trucking Associations' National Driver of the Year Award.

Publicity for all finalists will include press releases distributed to media in both the submitting company and driver's town or city, acknowledgement on TANY's social media platforms, and in both the member-only weekly *Friday Final* newsletter and quarterly *Milepost* magazine.

* Any applicant who has won the statewide title within the past two years is not eligible to win but can still qualify as a finalist.

For more information, contact: **Alexis Vetro**, *Program and Events Manager*(518) 458-9696 ext.111 or alexis@nytrucks.org

Submission deadline: April 12, 2024



Trucking Association of New York

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2023 DRIVER OF THE YEAR

Nomination Form



Email:	Phone: ()	
Home Address:	City:	State: Zip:
Company Name:	Termir	nal Location:
Company Address:	City:	State: Zip:
Company Officer	Tit	le:
Company Officer Email:	Ph	none: ()
SAFETY INFORMATION:		
Number of Years CMV Driving:	Years with Present Emp	oloyer:
Type of Driving:	☐ Over-the-Road	□ Other
Equipment Operated: Truck	☐ Tractor/Trailer	□ Other
Total Miles Accumulated: Prese	ent Employer:	
Previou	us Employers:	
	TOTAL:	
Accident Type Date of	of Last # of Preventable	# of Non-Preventable TOTA
DOT Reportable Accidents		
Company Accidents/Incidents		
OTJ Lost Time Injuries		
Additional Information (Use additional Letter(s) of recommendation requirements (Company awards)	ired and must be submitted.	
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Community involvement and hob	bies:	
NOTE: To be considered, nomination accidents and injuries reported and		•
Certification: All of the information su	bmitted is accurate and true to	o the best of my knowledge.
Signature of Company Official	Date Signature	e of Driver Date