



# EXCELLENCE IN TRANSPORTATION AWARD

Application must be received by the ITD Awards Coordinator by **Thursday, March 30, 2017 at 4:00 p.m.**

## Official Awards Application

### About the Project:

Project Name: [Click here to enter text.](#)

Project Location: [Click here to enter text.](#)

Project Completion Date: [Click here to enter text.](#)

*Project Eligibility: See specific category criteria for project completion eligibility requirements.*

### Category for Judging:

- |  |   |
|--|---|
| <input type="checkbox"/> Construction                                | <input type="checkbox"/> Maintenance and Operations |
| <input type="checkbox"/> Small Design (Construction < \$2.0 Million) | <input type="checkbox"/> Public Participation       |
| <input type="checkbox"/> Large Design (Construction ≥ \$2.0 Million) | <input type="checkbox"/> Transportation Planning    |
| <input type="checkbox"/> Environmental Stewardship                   |   |

*A project may be entered in more than one category. Please submit a separate entry for each category.*

**Name of Firm/Agency Submitting the Project:** [Click here to enter text.](#)

Principal's Name and Title: [Click here to enter text.](#)

I hereby authorize submission of this project in the *2017 Excellence in Transportation Award* program sponsored by the Idaho Transportation Department.

Principal's Signature: \_\_\_\_\_

**Name of Contact with Firm/Agency:** [Click here to enter text.](#)

Title: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

City/State/Zip: [Click here to enter text.](#)

Phone: [Click here to enter text.](#) Fax: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

## **Additional Awards:**

*Each winning entry will have the opportunity to present up to three additional awards to other firms/agencies that have been involved with or contributed to the project (one being the Client/Owner).*

**(1) Name of Client/Owner:** [Click here to enter text.](#)

**Name of Client/Owner Representative:** [Click here to enter text.](#)

Title: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

City/State/Zip: [Click here to enter text.](#)

Phone: [Click here to enter text.](#) Fax: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

**(2) Name of Firm/Agency:** [Click here to enter text.](#)

**Name of Firm/Agency Representative:** [Click here to enter text.](#)

Title: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

City/State/Zip: [Click here to enter text.](#)

Phone: [Click here to enter text.](#) Fax: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

**(3) Name of Firm/Agency:** [Click here to enter text.](#)

**Name of Firm/Agency Representative:** [Click here to enter text.](#)

Title: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

City/State/Zip: [Click here to enter text.](#)

Phone: [Click here to enter text.](#) Fax: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

*Each winning entry will have the opportunity to present up to six certificates of recognition to key personnel who have contributed to the project. These certificates will be created using the names and spellings provided. Please be sure of their correctness.*

### **Key Contributing Personnel:**

	<b>Name</b>	<b>Organization</b>
1.)	Click here to enter text.	Click here to enter text.
2.)	Click here to enter text.	Click here to enter text.
3.)	Click here to enter text.	Click here to enter text.
4.)	Click here to enter text.	Click here to enter text.
5.)	Click here to enter text.	Click here to enter text.
6.)	Click here to enter text.	Click here to enter text.

### **Entry Requirements:**

Entries **must** consist of the following.

- 1.) One 24" x 36" mounted display panel illustrating the project
  - ♦ Label display panel with project title, location, award category, and name of entrant
  - ♦ Panels will be displayed at the 2013 Excellence in Transportation Awards Ceremony
- 2.) An electronic submittal of the awards application and category criteria
  - ♦ Documents submitted in Word or as pdfs are acceptable
  - ♦ Email all entry files to [adam.rush@itd.idaho.gov](mailto:adam.rush@itd.idaho.gov)
- 3.) A list of firm/agency/owner(s) involved in project (no more than 3)
- 4.) A list of key personnel contributing to the project (no more than 6)

### **Judging:**

Winning entries will be selected by a panel of qualified professionals from across the transportation profession. Award winners will be recognized at an Idaho Transportation Department Board meeting later this year.

### **Send Entries To:**

Adam Rush - Awards Coordinator  
Idaho Transportation Department – HQ DMC  
(3311 W. State Street) PO Box 7129  
Boise, Idaho 83707-1129

*For questions, please contact Adam Rush at (208) 334-8119 or [adam.rush@itd.idaho.gov](mailto:adam.rush@itd.idaho.gov)*