

EXCELLENCE IN TRANSPORTATION

AWARD

Application must be received by the ITD Awards Coordinator **by COB** **Thursday, Dec. 15, 2022.**

*Multiple winners may be selected in this category based on the overall quality of the submissions.*

**Career Achievement Award - Nomination Criteria**

This award recognizes an employee with 20+ years of service to ITD who has made many significant contributions to the organization and his/her peers. The employee must currently be employed by ITD or have retired within the last twelve months. Previous winners are ineligible.

**Narrative:** Please provide a brief narrative describing the nominee’s outstanding contributions and accomplishments in the following areas:

* Dedication to his/her own professional growth as well as the professional development of fellow employees
* A role model and/or mentor to others
* Advancement of ITD through innovative processes and procedures
* Recognizes when change is needed and successfully implements those changes
* Consistent performance at a high level of achievement

**Entry Requirements:**

1. Nomination narrative is limited to 1,000 words, must utilize size 12 font and be double-spaced for readability
2. Please include at least one individual photo, along with project and/or team photos
3. Submit an electronic copy of the nomination narrative and nomination application
   1. Documents must be submitted in Word format
   2. Email all files to ITDCommunication@itd.idaho.gov

**Judging:** The winning nomination(s) will be selected by a panel of qualified professionals from across the transportation profession. The award winner(s) will be recognized at an Idaho Transportation Department Board meeting.

**Send Entries To:**

Idaho Transportation Department – HQ Office of Communications

*Email:* ITDCommunication@itd.idaho.gov

*For questions, please contact Reed Hollinshead at (208) 334-8881 (cell 208 608-6118) or* reed.hollinshead@itd.idaho.gov

**Official Nomination Application**

**About the Nominee**:

Nominee Name: Click here to enter text.

Title: Click here to enter text.

Company: Click here to enter text.

Phone: Click here to enter text.

Email: Click here to enter text.

**Name of Individual(s) Submitting Nomination:** Click here to enter text.

Company: 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.

*Application sheet must be attached to nomination to ensure proper contact information is provided on the nominee and submitting party in case further information is required.*