



**CTA/Volvo Trucks Canada
National Driver of the Year Program**

**Alberta Motor
Transport Association**

**Atlantic Provinces
Trucking Association**

**British Columbia
Trucking Association**

**Manitoba Trucking
Association**

**Ontario Trucking
Association**

**Association du
Camionnage du
Québec**

**Saskatchewan
Trucking Association**

**2011
Nomination
Package**

Packages should be completed and returned to:

**Canadian Trucking Alliance
(Toronto Office)**

Att: Deanna Pagnan, Communications

555 Dixon Road

Toronto, Ontario M9W 1H8

Phone: 416-249-7401 x 224

Deanna.pagnan@cantruck.ca

Deadline: August 30, 2011

The following documentary materials must be provided for your provincial driver of the year to enter the 2011 CTA/Volvo National Driver of the Year Program:

- Provincial Association Nomination Form**
- Driver Certification and Agreement**
- Company Certification and Agreement**
- Driver Information Sheet**
- Collision Record (must include CVOR and Drivers Abstract)**
- Contributions to Highway Safety**
- Outstanding Acts of Courtesy and/or Courage**
- Photo of Driver**
- Any Additional Supporting Material**

In addition to the foregoing, an investigation should be made to verify the accuracy of information furnished in support of the nominations.

DRIVER NOMINATION FOR USE BY PROVINCIAL TRUCKING ASSOCIATIONS

Information

1. Nominations may be made by CTA affiliated provincial trucking associations only. The nominee must be the official 'Provincial Driver of the Year'.
2. All forms contained herein must be completed and signed as required.
3. A photograph is helpful but not mandatory.
4. Information furnished in support of this nomination will be verified by the nominating provincial trucking association to assure accuracy. Where copies of drivers' records are available from provincial governments, these should be included with the nomination. **Important: Copies of the driver's official government records (CVOR and drivers abstract) must be included with the nomination.**
5. 'Driver Certification and Agreement' must be signed for nomination to be valid.

SELECTION CRITERIA

Selection of the National Driver of the Year will be based on the following criteria:

1. **Basic Requirement**

The employee must have been regularly employed as a truck driver for the last five years and during that period must have encountered no preventable Collisions. **(Note: We recommend you only nominate drivers who have never had a preventable during their professional driving career).**

2. **Other Criteria**

Judges will be instructed to consider evidence of the nominee's active participation in programs and initiatives pertaining to highway and industry safety. Such participation may consist of involvement in safety committees, truck rodeo, driver training programs, first-aid courses, or other activities of a similar nature.

As well, judges will also consider unusual courtesy extended to other highway users, and any acts of bravery arising out of highway occurrences within the last twelve months.

PROVINCIAL ASSOCIATION NOMINATING FORM

Driver's Name _____

Company _____

Nominating Association _____

This nomination is based upon safe driving record of the nominee, his personal qualities, and his deeds and reputation as a professional truck driver.

Information contained herein has been verified as to accuracy and completeness by the provincial trucking association or its agents. The nominee has been interviewed and found to be a worthy representative of the trucking industry.

It is agreed that should this driver be selected for the title "National Driver of the Year", publicity and advertising originated by the provincial association will be in line with policies developed by the Canadian Trucking Alliance.

Signed _____

(Association Manager)

DRIVER CERTIFICATION AND AGREEMENT

In consideration of my being allowed to participate in this Program of the Canadian Trucking Alliance, and to be eligible for any awards and recognition offered in the Program, I hereby certify and agree to the following:

1. All of the statements contained in the material submitted in support of my nomination are true. I authorize the Canadian Trucking Alliance, and its representatives, to make an independent check of all information contained herein.

2. I authorize the Canadian Trucking Alliance and its designated agencies to make full use of the above described information about myself and of photographs supplied with this application, along with photographs subsequently taken under CTA's direction, in publicity and advertising activities. I further agree to make myself available for publicity enterprises arranged by the Canadian Trucking Alliance with newspaper and magazine writers and radio and television personnel.

3. I will always conduct myself in such a way as to protect and maintain the high status of the honour bestowed upon me and I agree that this recognition may not be used in any advertising, promotion or exhibition except those sanctioned in writing by the Canadian Trucking Alliance.

Signature of Nominee

Driver of the Year for

(Name of Province)

COMPANY CERTIFICATION AND AGREEMENT

In consideration of our driver being allowed to participate in this program, this company does certify and agree to the following:

1. All statements contained in the material submitted in support of this driver's nomination are true to the best of the company's knowledge. These statements have been investigated by the company to the best of its ability and a company representative has personally reviewed with the driver the facts contained herein.
2. It is agreed that should our driver receive the title "National Driver of the Year", the company will work to protect and maintain the high status of his recognition and will not use this recognition in any advertising, promotion or exhibition except those sanctioned in writing by the Canadian Trucking Alliance.

The driver interview and investigation of the facts submitted in support of this nomination have been made by _____

Company _____

Signed _____

(Company Executive Officer)

Driver's Name _____

Nominated By _____

(Name of Provincial Trucking Association)

DRIVER INFORMATION SHEET

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

Driver's Name _____ Age _____

Nominating Provincial Trucking Association _____

Driver's Home Address _____

Married? _____ Wife's First Name _____ Children? _____

Children's Names and Ages _____

Present Employer _____ Date Employed _____

Main Address _____

Driver's Terminal Address _____

Previous Employment:

1. _____
(Company) (Address) (Dates)

2. _____
(Company) (Address) (Dates)

3. _____
(Company) (Address) (Dates)

Commercial Driving Experience:

Total Years _____ Total Miles _____ Total KM _____

Present Employer _____

Collision Record: Total Preventable Collisions _____

Years and kms of Driving since last Preventable Collision

Years _____ Total miles _____ Total KM _____

DRIVER INFORMATION SHEET (2)

Police record (list any convictions, if any, related to traffic offences, e.g. speeding, reckless driving, etc.) including automobile driving.

Type of equipment regularly operated

Provide a short description of your usual points of origin and destination and the annual mileage you drive.

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

Rodeo competition (first rodeos competed in, class and standing)

Provincial Rodeo Awards:

Province _____ Years _____ Class _____

National Awards:

Years _____ Class _____

Courses or schooling on first aid, driver education, safety (show types of course, sponsors and date):

Safety activities engaged in (such as neighbourhood projects, civic programs and give dates and brief description):

I certify that the information furnished in this "Driver Information Sheet" 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 that the information herein is correct to the best of my knowledge.

Signed: _____
(Company Official)

COLLISION RECORD

Driver's Name _____

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

Collision #1

Date: _____ Property Damage Cost: _____

No. of People Injured: _____ Number of Fatalities: _____

Type of Vehicle Driver was Operating: Truck Car

Collision Classified as: Preventable Non-preventable

Collision #2

Date: _____ Property Damage Cost: _____

No. of People Injured: _____ Number of Fatalities: _____

Type of Vehicle Driver was Operating: Truck Car

Collision Classified as: Preventable Non-preventable

Collision #3

Date: _____ Property Damage Cost: _____

No. of People Injured: _____ Number of Fatalities: _____

Type of Vehicle Driver was Operating: Truck Car

Collision Classified as: Preventable Non-preventable

Collision #4

Date: _____ Property Damage Cost: _____

No. of People Injured: _____ Number of Fatalities: _____

Type of Vehicle Driver was Operating: Truck Car

Collision Classified as: Preventable Non-preventable

