

2017 Safety Awards & Scholarship Program



Great West Casualty Fleet Safety Awards

The Fleet Safety Awards are an annual recognition for carriers operating in the State of Georgia with the best safety record in its class. This is an opportunity to reward the professional efforts of our trucking members who help make our Georgia highways safe. Also, this award offers you a chance to let your drivers know the importance of their contribution to your company's safety accomplishments. This competition stresses the importance of safety, recognizes professionalism, and focuses on principles behind safety driving.

Georgia Driver of the Year

Nominate one of your drivers for this award and it is one of the most prestigious awards a driver can win. It is an excellent way to recognize a top performer and to promote goodwill among your drivers and their co-workers. Basis for nomination includes the driver's safety record, years of experience, documented acts of courtesy or heroism, contributions to highway safety, letters of commendation, and any other information relating to his/her professionalism. Any driver is eligible that resides in and/or is domiciled in Georgia, and whose employer is a motor carrier member of the Georgia Motor Trucking Association. Nominations are limited to one driver per company.

Georgia Safety Professional of the Year

This annual recognition is presented to an active member of the Council who has excelled in the field of truck safety. Nominees must be a member of the Safety Management Council, be employed full-time in Georgia for the past five years, and performing duties directly related to truck fleet loss prevention. Nominations can be made by anyone and previous winners are not eligible. Judging will be based on the professional qualifications of the nominee, his/her success in advancing highway and industrial safety in his/her fleet, and his/her work and leadership in the GMTA Safety Management Council and other professional safety organizations. As a condition of the nomination, the nominee and his/her employer grant to the Awards Committee full authority to investigate any records and premises to determine qualifications for the award. In turn, the Committee agrees to maintain the confidentiality of the results of such investigations.

Rick Perkins Memorial Scholarship

The GMTA Memorial Scholarship Award is dedicated to the memory of Rick Perkins, a former leader in the GMTA Safety Management Council and director of the Georgia Truck Driving Championships. This tribute is in recognition of his years of dedication and leadership as a driving instructor at Carroll Technical Institute, his active participation in the Safety Council, and his contributions to highway safety and the trucking industry. The annual scholarship will provide \$1,000 towards the furtherance of education to an eligible child or grandchild of a participant in the Georgia Truck Driving Championships. The award will be paid to any technical school, college or university of the recipient's choice.

Important Dates

April 21st – Safety Awards & Scholarship Deadline

May 13th – Awards Ceremony

Great West Casualty Fleet Safety Awards



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Award winners will be announced at the Awards Banquet at the Georgia Truck Driving Championships on May 13th. Please plan to make your company a part of the competition this year.

PLEASE REVIEW THE CONTEST RULES ON THE BACK AND RETURN THIS FORM BY APRIL 21, 2017.

Company Name: _____

City & State: _____ **Email:** _____

Company Safety Director: _____ **Phone:** (_____) _____

Check () one contest division. Copy this form as needed for more than one division.

- | | | |
|--|---|--|
| <input type="checkbox"/> General Commodities Truckload | <input type="checkbox"/> Household Goods | <input type="checkbox"/> Flatbed |
| <input type="checkbox"/> General Commodities LTL | <input type="checkbox"/> Heavy Hauler | <input type="checkbox"/> Dump Truck |
| <input type="checkbox"/> Tank Truck | <input type="checkbox"/> Auto Transporter | <input type="checkbox"/> Miscellaneous (Specify Below) |
| _____ | | |

2016 Georgia Fleet Data	Georgia Fleet Vehicle Miles	Georgia Fleet DOT Recordable Accidents	Georgia Fleet Frequency Rate
			<small>Frequency = $\frac{\text{Total Georgia Accidents} \times 1,000,000}{\text{Total Georgia Miles}}$</small>
Line-Haul			
Local			
Total			

2016 Total Fleet Data <small>(All Operations)</small>	Total Fleet Vehicle Miles	Total Fleet DOT Recordable Accidents	Total Fleet Frequency Rate

Improvement Award Data: 2015 Georgia Fleet Information		
2015 GA Accidents _____	2015 GA Mileage _____	2015 GA Frequency _____

THE FOLLOWING CERTIFICATION MUST BE SIGNED BY AN OFFICER OF THE COMPANY OTHER THAN THE SAFETY DIRECTOR.

We hereby certify that the information submitted above is correct to the best of our knowledge and belief. We agree that a check of the record may be made prior to the announcement of any award to this organization.

Signature: _____ Title: _____

2017 GREAT WEST CASUALTY FLEET SAFETY AWARDS

RULES AND REGULATIONS

- ◇ Entries are limited to trucking company members of GMTA.
- ◇ Mileage and accidents will be reported for Georgia operations only (except where noted “Total Fleet Data”).
- ◇ Reporting of Accidents: **All DOT recordable accidents**, whether preventable or non-preventable, should be reported.

Please note the following accident guidelines:

- A. The amount of damage or cost of repair is not a factor in determining if the occurrence is an accident.
 - B. DOT recordable accidents are those that must be recorded in the company accident register and available for review in the event of a FMCSA audit as described in 49 CFR 390.5.
 - C. These accidents include:
 - 1) Any accident involving a fatality;
 - 2) Any accident with bodily injury to a person who must be transported away from the scene for medical treatment;
 - 3) Any accident where one or more vehicles incur disabling damage and must be transported away from the scene by tow truck.
 - D. These accidents do not include:
 - 1) An occurrence involving only boarding and alighting from a stationary motor vehicle;
 - 2) An occurrence involving only the loading or unloading of cargo.
- ◇ A separate report must be filed for each division representing a different type of service performed within the state.
 - ◇ A plaque or other suitable recognition will be awarded for the lowest accident frequency ratio in each of the divisions.
 - ◇ A panel of judges selected by the GMTA Safety Management Council shall judge all entries and determine all winners. In addition, the panel will select from among the winners a “Grand Champion”, giving consideration to the following factors:
 - Accident Frequency
 - Overall Safety Program
 - Interest Shown in Trucking Industry Safety Activities
 - Improvement in Safety Record

All entries must be received by April 21, 2017

Please mail or fax to:

GMTA FLEET SAFETY AWARDS
2060 Franklin Way, Suite 200
Marietta, Georgia 30067
(770) 444-9771 • Fax (770) 444-9442

DRIVER INFORMATION SHEET – 2017 GEORGIA DRIVER-OF-THE-YEAR

(PLEASE TYPE OR PRINT INFORMATION)

DEADLINE: April 21, 2017

FULL NAME:

_____ (First) _____ (Middle) _____ (Last)

HOME ADDRESS:

MARRIED: NO YES SPOUSE'S NAME: _____

CHILDREN (Names & Ages) _____

EMPLOYER: _____ # YEARS _____

SUPERVISOR'S NAME: _____ PHONE: () _____

Home Terminal Address: _____

YEARS OF COMMERCIAL DRIVING: *Present Employer* _____ *Previous Employer* _____

OR

TOTAL MILEAGE OF COMMERCIAL DRIVING:

Present Employer _____ *Previous Employer(s):* _____

SAFE DRIVING RECORD: TOTAL MILES _____ **OR** YEARS _____

TOTAL ACCIDENTS (if any): *Present Employer* _____ *Previous Employer(s)* _____

DATE OF LAST PREVENTABLE ACCIDENT (*Present Employer*): _____

DATE OF LAST NON-PREVENTABLE ACCIDENT (*Present Employer*): _____

MOVING VIOLATIONS (List All): _____

TYPE OF EQUIPMENT REGULARLY OPERATED:

Straight Truck Tractor/Trailer Other - Describe: _____

USUAL RUN: Local Peddle Line-Haul

LETTERS of commendation, acts of heroism, etc: (Unsolicited, supported by copies of letters)

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PERSONAL SAFETY RECORD: _____

PUBLIC & CUSTOMER RELATIONS: _____

EMPLOYER/EMPLOYEE RELATIONS: _____

ACCEPTANCE OF RESPONSIBILITY: _____

CARE OF EQUIPMENT: _____

CONTROL OF O.S. & D. & FREIGHT HANDLING: _____

WORK ETHIC: (Attitude, attendance, etc.) _____

Thank you for furnishing this information. To complete the application process, please enclose the following:

- A photocopy (front & back) of your driver's license showing your name and/or signature, class and endorsement(s).
- A current copy of your motor vehicle and driving record from Georgia DDS.
- A recent 2" x 3" (or larger) Head and Shoulder Photograph.
- The name of your hometown newspaper (including city and nearest city to your hometown).



GEORGIA DRIVER-OF-THE-YEAR

2060 FRANKLIN WAY, SUITE 200 • MARIETTA, GEORGIA 30067

PHONE: (770) 444-9771 / FAX: (770) 444-9442

2017 SAFETY PROFESSIONAL OF-THE-YEAR

Nominee's Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Company: _____

Address: _____
(Street) (City) (State) (Zip Code)

Please list years of participation in the following GMTA Safety Council activities: Council Member _____
Chairman _____ Vice Chairman _____ Secretary _____ Treasurer _____ Council Committee(s) _____

Please check all activities that apply: Chairman Committee Participant
Georgia Truck Driving Championships _____

Truck Safety Inspection Committee _____

Cooperative Safety Patrol _____

Nominating Committee _____

Other Committees _____

Employment History: Names of companies by whom the nominee has been employed in the trucking industry, the dates of employment in each job classification, and the duties and responsibilities. You may attach additional sheets.

<u>Date</u>	<u>Company</u>	<u>Job Title/Brief Description</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Safety Performance: For the companies named under "Employment History", please note accident and injury ratios, improvements, and awards while under nominee's direction.

<u>Company</u>	<u>Accident Ratio</u> (per 1,000,000 miles)	<u>Injury Ratio</u> (lost workdays ÷ # employees)	<u>Improvement/Awards</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Other activities, such as speaking engagements before service organizations, schools or industry groups; interviews with news media; state or local safety meetings or programs.

Participation in truck fleet safety supervisor training programs, or other formal truck-related training.

Do you hold a certification by ATA's National Committee for Motor Fleet Supervisor Training as:

Director of Safety ____ Year ____ Motor Fleet Safety Supervisor ____ Year ____ Driver Trainer ____ Year ____

List memberships and offices held in other safety organizations:

I certify that to the best of my knowledge, the information contained in this document is true.

Nominee's Signature

Date

Witnessed this the ____ day of _____, 2017

RICK PERKINS MEMORIAL SCHOLARSHIP AWARD

TO BE ELIGIBLE THE APPLICANT'S MUST:

- Be the child or grandchild of a driver registered to compete in the 2017 Georgia Truck Driving Championships
- Be a high school junior or senior and planning to attend either a technical school, public or private college or within two (2) years of the submission of this application
- Have a high school grade point average of 3.0 (B) or higher
- Applications must be received by April 21, 2017

THESE ITEMS MUST ACCOMPANY THE SCHOLARSHIP APPLICATION:

- A high school transcript or GED equivalent
- 1,000 word essay from the applicant on: "What safe driving means to my family, my community and me."
- Two (2) letters of reference from non-family members
- A current copy of your motor vehicle driving record (MVR)

Applicant's Name: _____	Telephone Number _____	
Address: _____ (Street) (City) (State) (Zip Code)		
Applicant's Date of Birth: _____	Graduation Date _____	Social Security Number _____
High School Attending: _____		Telephone Number _____
Address: _____ (Street) (City) (State) (Zip Code)		
Grade Point Average: _____	Principal's Name _____	Counselor's Name _____
University or College Expected to Attend: _____		Telephone Number _____
Address: _____ (Street) (City) (State) (Zip Code)		
Expected Enrollment Date: _____	Have You Been Accepted? _____	Yes (attach acceptance letter) _____ No

Parent/Grandparent Name: _____	Telephone Number _____	
Company: _____	Years of Service _____	Telephone Number _____
Company Address: _____ (Street) (City) (State) (Zip Code)		
Company Safety Manager: _____		

Please List High School Activities: _____

Other Activities (Church, Sports, Hobbies, Jobs, etc.): _____

Please Mail To: Georgia Motor Trucking Association * Rick Perkins Memorial Scholarship * 2060 Franklin Way, Suite 200 * Marietta, GA 30067