The Association of Transportation Safety Information Professionals (ATSIP) will recognize an organization or individual having demonstrated extraordinary achievement in improving traffic records and highway traffic safety at a state, regional or national level.

This award not only recognizes individual achievements, but also encourages continued excellence in the field.

This award program provides an opportunity to honor those dedicated to advancing ATSIP's strategic goals.

Application Process

To nominate an individual please submit the following:

**Summary Statement.** Prepare a summary statement no longer than two double-spaced typed pages describing how the nominee meets the criteria.

**Supporting Materials.** Supporting materials have no length limit and can include articles, letters, and any additional information to support the candidate’s nomination. Supporting materials cannot be returned unless specific arrangements are made with the award committee chair in advance of submittal. **Please do not send one-of-a-kind or irreplaceable originals.**

Electronic submissions are STRONGLY ENCOURAGED. PDF format, one copy only.

If hard-copy submissions are made, please send 5 copies, collated, of all materials to the contact listed at the end of these instructions.

Application Deadline

Complete nomination packages must be received by June, 30, 2015 for consideration for the 2015 Award.

Confirmation of receipt of nomination packages will be made via e-mail unless otherwise requested in the submission materials.
Award Notification

The winning nominees will be notified on or before August 31, 2015. Those who submitted a non-winning nomination will be notified on that date.

Presentation of Awards

The award will be presented in a formal ceremony during the Annual Awards Luncheon at the 41st INTERNATIONAL FORUM on TRAFFIC RECORDS & HIGHWAY SAFETY INFORMATION SYSTEMS.

Attendance arrangements will be made by ATSIP’s conference staff once the award recipients are selected.

Review Process and Criteria

Process: Nominations will be reviewed by a panel composed of ATSIP Board members and other distinguished colleagues in the field of traffic records, led by the award committee chair.

Nominations may be put forward by anyone. ATSIP membership is not required. Individuals may not nominate themselves. A group may be nominated by any person, whether a member of the group or not.

Criteria: the nomination should show how the individual or organization:

- Is a recognized advocate for Traffic Records Improvement, whose advocacy has had a significant effect on public attention and action;
- Has devoted notable effort to promoting and advancing traffic records;
- Has worked to change the manner in which we collect, manage or use highway safety information to decrease the likelihood of crashes and the severity of crashes or their consequences;
- Is active on numerous committees and boards at the local, state, or national level;
- Performs other notable activity in the area of traffic records.
- Awards are based on a pattern of excellence as well as demonstrated impact on the field of traffic records and highway safety.

SEND APPLICATIONS AND DIRECT ALL QUERIES TO:

The Association of Transportation Safety Information Professionals
Chair, ATSIP Distinguished Achievement Award Selection Committee
Robert A. Scopatz, Ph.D.
Secretary, ATSIP
2341 75th St. E
Inver Grove Heights, MN 55076-2323
712-310-3072
bscopatz@data-nexus.com
AWARD APPLICATION COVER

Please complete this application cover and include it with the summary statement describing how the nominee meets the award criteria, and any additional materials to support the nomination. Submit all materials to the contact listed in the instructions.

Nominee: ________________________________

Title (if applicable): ________________________________

Organization (if applicable): ________________________________

Address: _________________________________________
___________________________________________

Telephone: ___________ FAX: ________________

Email: ____________________________
___________________________________________

Nominated By: ________________________________

Title (if applicable): ________________________________

Organization (if applicable): ________________________________

Address: _________________________________________
___________________________________________

Telephone: ___________ FAX: ________________

Email: ____________________________

NOTE: If this is a post humus nomination, please include contact information for the nominee’s next of kin and the dates (or year) of birth and death. If no next of kin or next of kin is unknown, state this fact and provide information for a representative (if known) for the deceased.