## Tribal Safety Champions Of the Year 2015

Nominee Application

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APPLICATION SUBMITTED BY: Name:	_ Date:
Phone:	Email:
Organization/Company:	
TRIBAL SAFETY CHAMPIONS OF THE YEAR NOMINEE:	
Name:	_ Date:
Phone:	Email:
Job Title :	
Company/Organization:	
To the best of your knowledge, please answer the following questions below about the group you are nominating.  1. How many years has the nominee contributed to the motor vehicle safety or injury prevention field?	
2. What type of involvement/relationship does the nominee have with tribal communities?	
3. What significant contribution or impact has the nomine	ee made in the motor vehicle safety or injury prevention field?

4. A letter of recommendation is needed to complete your application. In your opinion, why is this person the Southern Plains TTAP Safety Champions of the Year? (Please include all relevant information including accomplishments, program participation, tribal community involvement, awards, etc.) Please submit photos, news articles, or other materials with the nomination form that support the nominee's work. The letter of recommendation is to not exceed more than 2 pages.