

2022 APTA Innovation Award Form

Nominee/Nominator Information

1. Please provide the finominating: *	ollowing information about the organization you are
Organization Name	
Address	
City	
State	
Zip Code	
Country	

2. Please provide the following information about yourself:*			
First Name:			
Last Name			
Email Address			
Title			
Organization Name			
Address			
City			
State			
Zip Code			
Business Phone (xxx-xxx-xxxx)			
Cell Phone (xxx-xxx- xxxx)			
Criteria			

Page description:

This award honors an APTA public transportation system member who has demonstrated innovative concepts or effective problem-solving techniques not previously applied in the public transportation industry. **All sections must be completed**.

Please enter the following information:

3. Enter the description of the innovative program or project. (500 words maximum) *
4. Enter a summary of the results received and the positive effect on the organization. (500 words maximum) *
5. Enter a description of its applicability to other systems. (500 words maximum) *

6. Enter a description maximum) *	of how the innovation supports industry goals. (500 words
Supporting Documentation	n
•	nan 3 supporting documents here. (i.e., news articles, c.) Do not include videos or embedded links.
•	ox, you agree that the information submitted has been of the transit system and is accurate and verifiable. *