

# 2024 APTA Excellence In Inclusive Collaboration Award Form

## Nominee/Nominator Information

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1. Please provide the following information about the three organizations you are nominating for this award (transit agency, prime contractor, and DBE firm). All three organizations must be APTA members in good standing. \*

1. Transit Agency  
Name

Address

City

State

Zip  
Code

Contact  
Phone

2. Prime Contractor Name

Address

City

State

Zip

Contact  
Phone

3. DBE Firm Name

Address

City

State

Zip

Contact  
Phone

2. Please provide the following information for the primary contact person for this award submission: \*

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**

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3. Enter the description of the program, project, service, contract, delivery, or outcome (either on-going or recently completed), including size and scope including a description of roles and responsibilities of the joint nominees. (500 words maximum) \*

4. Enter an overview of the approach to collaboration with impacted and/or affected communities. (500 words maximum) \*

5. Enter an overall summary of the results, positive effects and any innovations achieved due to the collaborative, inclusive approach, and diversity of perspectives. (500 words maximum) \*

6. Enter a description of any key lessons learned as a result of the collaboration which can be applied in the future. (500 words maximum) \*

7. Enter a statement from the perspective of each of the joint nominees on how the results achieved impacted their organizations. (500 words maximum) \*

8. Enter a description of how the collaboration supports industry and APTA goals related to equity, diversity, and inclusion. (500 words maximum) \*

### Quantitative Metrics

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9. Percentage of work completed by the disadvantaged business enterprises nominated:

10. Total dollars expended with all disadvantaged business enterprises:

11. Achievement or exceedance of any disadvantaged business enterprise goals:

12. Any workforce development outcomes:

### Supporting Documentation

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13. Enter up to three pages summarizing other relevant materials, such as agency or company policies, changes to contracting to reduce barriers to DBE participation, testimonials and evidence of other recognition or awards relating to diversity, inclusion and equity awarded to the program, project, service, contract, delivery, or outcome.

Upload **no more than 3** supporting documents here. Do not include videos or embedded links.

Browse...

14. By checking this box, you agree that the information submitted has been reviewed by the head of the transit system, and the contributing prime contractor and DBE firm and you agree that this information is accurate and verifiable. \*

I agree