

# 2025 Outstanding Partnership in Public Transportation Award

## 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 certified small business 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. Small Business 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. Provide a description of the program, project, service, contract, delivery, or outcome (project must be completed or reached a significant milestone within the past 24 months), including size, scope, description of roles and responsibilities of the joint nominees and percentages of work completed by each contractual party (prime and certified small business). Was it delivered on time, within budget and did it meet or exceed the project goals? (500 words maximum) \*

4. Provide an overview of how the project/program addressed community needs and improved transit service or infrastructure. (500 words maximum) \*

5. Provide a summary of the positive effects and any innovations or creative solutions developed through partnership synergy, unified team integration, capacity building, mentorship or new opportunities created through small business empowerment. (500 words maximum) \*

6. Provide a description of any key lessons learned as a result of the collaboration between agencies, large firms and small businesses that 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. Describe any best practices that can be shared across the industry. (500 words maximum) \*

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## Quantitative Metrics

9. Percentage of work completed by the small business(es). At least one certified small business must be part of this project/program:

10. Total dollars expended with all small business(es) involved in the project/program:

11. Achievement or exceedance of any small business goals:

12. Any workforce development outcomes:

**Supporting Documentation**

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13. Enter up to three attachments such as testimonials, photos, press coverage, letters of support, changes to contracting to reduce barriers to certified small business participation, or other awards 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 certified small business firm and you agree that this information is accurate and verifiable. \*

☐ I agree