Partnering Spirit Award Nomination Form

NAME OF NOMINEE		NOMINEE'S COMPANY OR AGENCY				
NOMINEE'S COMPANY OR AGENCY STREET ADDRESS		CITY		STATE		
NOMINEE'S POSITION/TITLE IN COMPANY	OR AGENCY					
Name of Nominator (submitted by)	Phone Nur	mber	Email Address			
Relationship to Nominee	Nominator's Company or Agency					
Name of Project Related to Nomination	1	_				
Project TRACs Number if available	Project Status: Completed ☐ Active ☐					
Name of Nominee's Supervisor			Phone Number of Nominee's Su	ıpervisor		
Email Address of Supervisor						
Name of Partnering Champion			Phone Number of Partnering Cl	nampion		
Email Address of Partnering Champion						
What would be an appropriate opportu If this is a current project can the award						
Suggested Presentation Date Tim	ie	Location				
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In the space below provide specific information on why he or she should receive a Partnering Spirit Award. You are encouraged to provide examples of how the nominee worked with other team members to uphold the common Partnering Principles of Communication, Commitment, Cooperation and Continuous Improvement.							

Approval process will take less than 10 business days from date of submittal.

The Partnering Office recommends saving a copy of the nomination form before submitting. To submit the completed Partnering Spirit Award nomination form to the ADOT Partnering Office, please email completed form to: PartneringSpiritAward@azdot.gov.

