

H. R. LABOUNTY SAFETY AWARDS PROGRAM NOMINATION FORM



Agency: _____

Employee Nominated:

Name: _____

Job Classification: _____

Reason for Nomination:

**This nomination addresses risk reduction “best practices” in the JPIA’s
Commitment to Excellence Program.
(Check all that apply.)**

<p>Vehicle Operations</p> <p>Construction</p> <p>Ergonomics/Falls</p> <p>Infrastructure</p> <p>Other</p>

Nominated by: _____

Signature: _____

Date: _____

General Manager: _____

Date: _____

Please email this form with supporting documents and digital photos to
tlofing@acwajpia.com or mail to: ACWA JPIA, P.O. Box 619082, Roseville, CA 95661-9082.





