

2026 MTBMA SAFETY AWARDS

ED TRACEY DISTINGUISHED SUPERVISOR NOMINATION FORM



APPLICANT INFORMATION

(Last Name) (First Name) (M.I.)

(Company)

(Supervisor’s Name / Title) (Supervisor’s Signature)

☐ Contractor ☐ Aggregate Producer

AWARD CRITERIA

Please provide the below required information. The candidate must meet all criteria of the base level award.

Was the applicant responsible for more than 1600 hours during the 2025 calendar year in a supervisory role? YES NO

Was the applicant involved in any environmental accidents during the 2025 calendar year? YES NO

If yes, please explain:

Please provide descriptions of any innovative ideas and/or identified unsafe work procedures on jobs which he/she has worked on during the 2025 calendar year:

Using your discretion, has the applicant exemplified your company’s core values? YES NO

If yes, please provide company’s core values and explain: