

Cover Sheet Chapter Contact Information Chapter **Chapter Contact Name** Role with WTS Email Phone Number **Nominee Information Employer Nominee Contact Name** Contact Title **Email Phone Number**



The WTS Recognition Awards celebrate leaders and organizations that move forward the Mission and Vision of WTS International. Applications are competitive and must meet the minimum criteria shown on the respective application.

The Employer of the Year Award nominee must support WTS through membership, sponsorship and employee involvement. The nominee's structure includes women in executive and senior positions leading initiatives. The structure must have career development and succession programs in place advancing women and must continue education programs and professional development support for women and provide internship opportunities supporting women entering the Transportation industry.

Please share a narrative to the following questions about the nominee.

1.

Summarize why the nominee deserves to win (max 300 words)					



<u> </u>	Describe and provide example(s) of how the organization supports WTS through memberships, sponsorships, and employee involvement at the local and international levels. (max 250 words)



3.	Describe the organization's structure, including the number of women in executive and senior positions and those leading major initiatives. (max 250 words)



Describe the advance with	career develop nin the organiza	ment plans an ation. (max 250	d succession p words)	rograms in pla	ce for women to



of its female er	orovide example(mployees througevelopment oppositions)	h professional		



6.	Describe and provide example(s) of how the organization encourages female students to enter the transportation field by providing internship opportunities. (max 100 words)					



Demographic Information

WTS is committed to building on the diversity of our recognition awards candidates. To track our progress in this area, we ask that you complete this confidential demographic information, if known. This is not required for recognition awards and will not be used in the selection process.

1.	Race/Ethnicity (select all that apply)
	☐ Asian
	□ Black
	☐ East Indian
	☐ Hispanic/Latino
	☐ Indigenous
	☐ Middle Eastern
	☐ Multiracial
	□ Pacific Islander
	☐ White
	□ Other (Please write in)
	☐ Choose Not to Disclose
2.	Gender
	☐ Female
	□ Male
	□ Non-binary
	□ Self-identify (Please write in)
	☐ Choose Not to Disclose
3.	Age
	□ 18-30
	□ 31-40
	□ 41-55
	□ 56-66
	□ 67+

4.	Mode
	☐ Aviation
	☐ Freight
	☐ Highway/Auto
	☐ Maritime/Port
	☐ Multi-Modal
	☐ Non-Motorized
	☐ Passenger
	☐ Transit
	□ Other (Please write in)
5.	Sector
	☐ Academic
	☐ Association
	□ Non-Profit
	□ Private
	□ Public
6	How did you hear about this award?
٠.	□ Colleague
	□ Social Media:
	☐ Facebook
	☐ Instagram
	☐ Snapchat
	☐ TikTok
	☐ Twitter
	☐ YouTube
	☐ Other (Please write in)
	□ WTS Chapter
	☐ WTS International Website
	□ Other (Please write in)

7.	Please share the approximate number of employees ☐ 1-50 ☐ 51=250 ☐ 251-500 ☐ 501-2,500 ☐ 2,501-5,000 ☐ 5,000+
8.	Please share the organizations year of incorporation/founding
9.	Please share the $\%$ breakdown of racial/ethnic diversity within the organization.