

**NAPT HALL OF FAME
NOMINATION FORM**

I WISH TO NOMINATE THE FOLLOWING INDIVIDUAL TO THE
NAPT HALL OF FAME:

NOMINEE'S NAME

NOMINEE'S STREET ADDRESS

NOMINEE'S CITY, STATE AND ZIP CODE

WAS THIS INDIVIDUAL NOMINATED IN A PREVIOUS YEAR? Yes ___ No ___

PLEASE CHECK ONE OF THE FOLLOWING: ___ ORIGINAL SUBMISSION
___ RESUBMISSION*

**If the nominee was nominated in a previous year, the file can be reactivated and only additional supporting material need be submitted by the above-mentioned deadline.*

NOMINATOR'S NAME (Please print)

NOMINATOR'S MAILING ADDRESS

NOMINATOR'S CITY, STATE AND ZIP CODE

NOMINATOR'S TELEPHONE NUMBER

NOMINATOR'S SIGNATURE

This nomination form, along with appropriate attachments, must be completed and returned no later than Thursday, August 15, 2024 to:

NATIONAL ASSOCIATION for PUPIL TRANSPORTATION
1971 Western Avenue #221
Albany, NY 12203

or by emailing info@napt.org