**2024 Excellence in Transportation Awards**

**Category 3: Equity and Livability**

**Entry deadline is Friday, February 28, 2025**

**Category: 3. Equity and Livability**

|  |  |
| --- | --- |
| **Project Name:** | Click here to enter text. |
|  |
| **Location:** | Click here to enter text. | **Date complete:** | Click here to enter text. |

**Project Summary**

**On this page, provide project summary of no more than 150 words in 12-point Times New Roman font.** This summary will be placed on the awards website if the project is selected as a winner.

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| Click here to enter text. |

**Please use next page for the project narrative.**

**Project Narrative –** Nominations exceedingthe limits will be disqualified.

1. **Demonstrates new approaches focused on collaborative community and partner engagement**. No more than 250 words in 12-point Times New Roman font.

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| Click here to enter text. |

1. **Integrates complete street networks that provide connectivity and accessibility for all modes of transportation**. No more than 250 words in 12-point Times New Roman font.

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| Click here to enter text. |

1. **Provides meaningful benefits to underserved communities to ultimately improve transportation accessibility and quality of life for people in all communities**. No more than 250 words in 12-point Times New Roman font.

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| Click here to enter text. |

1. **Eliminates transportation related disparities in safety, access, and health.** No more than 250 words in 12-point Times New Roman font.

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| Click here to enter text. |

1. **Restores a sense of community by fostering citizen and private sector participation in local planning, including transportation systems and facilities.** No more than 250 words in 12-point Times New Roman font.

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| Click here to enter text. |

**Please use next page for entrant organizations and contributing individuals.**

**2024 Excellence in Transportation Awards**

**Entrant Organizations and Contributing Individuals**

**Entry category: 3. Equity and Livability**

|  |  |
| --- | --- |
| **Project name:** | Click here to enter text. |
|  |
| **Location:**  | Click here to enter text. |  | **Completion date:** | Click here to enter a date. |
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| **Name, address, phone number and email address of person and organization submitting entry.** *Please submit organizations’ names as you would like them to appear on the plaque, if this project is selected as a winner.* |
|  |
| **Organization:**  | Click here to enter text. | **Contact name:** | Click here to enter text. |
|  |
| **Address:** | Click here to enter text. | **City:** | Click here to enter text. | **ZIP:** | Click here to enter text. |
|  |
| **Email address:** | Click here to enter text. | **Phone:** | Click here to enter text. |
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|  |
| **Additional organization(s) to receive a plaque (limit three)** |
|  |
| **2. Organization:**  | Click here to enter text. | **Contact name:** | Click here to enter text. |
|  |
| **Address:** | Click here to enter text. | **City:** | Click here to enter text. | **ZIP** | Click here to enter text. |
|  |
| **Email address:** | Click here to enter text. | **Phone:** | Click here to enter text. |
|  |
| **3. Organization:**  | Click here to enter text. | **Contact name:** | Click here to enter text. |
|  |
| **Address:** | Click here to enter text. | **City:** | Click here to enter text. | **ZIP:** | Click here to enter text. |
|  |
| **Email address:** | Click here to enter text. | **Phone:** | Click here to enter text. |
|  |
| **4. Organization:**  | Click here to enter text. | **Contact name:** | Click here to enter text. |
|  |
| **Address:** | Click here to enter text. | **City:** | Click here to enter text. | **ZIP:** | Click here to enter text. |
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| **Email address:** | Click here to enter text. | **Phone:** | Click here to enter text. |
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| **Contributing individuals:** Certificates of recognition (limit 10) are created using the names and spelling provided. |
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| **Name 1:** | Click here to enter text. | **Organization:** | Click here to enter text. |
|  |
| **Name 2:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 3:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 4:** | Click here to enter text. | **Organization:** | Click here to enter text. |
|  |  |  |  |
| **Name 5:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 6:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 7:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 8:** | Click here to enter text. | **Organization:** | Click here to enter text. |
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| **Name 9:** | Click here to enter text. | **Organization:** | Click here to enter text. |
|  |
| **Name 10:**  | Click here to enter text. | **Organization:** | Click here to enter text. |