Guidelines for submitting nominations for the IPTA:

2025 Tom Horn Memorial Award

The Tom Horn Memorial Award is presented annually to an lowa Pupil Transportation Association member serving in the capacity of school transportation director, supervisor, or administrator and who, in the eyes of his or her peers, has exhibited exemplary leadership skills and service to lowa's pupil transportation program, school district and community.

The recipient of this award will be announced and honored with the Tom Horn Memorial Award plaque during the IPTA's Annual School Transportation Conference in July, and the name of the recipient will be added to the official Tom Horn Memorial Award plaque on display at the IPTA office in Des Moines.

Guidelines for Nomination:

Nominees must:

- be a current member of IPTA in good standing.
- have been a continuous member of IPTA for the past three (3) membership years.
- have a minimum of five (5) years' experience in pupil transportation or a related field.
- must be in an administrative, managerial, or supervisory capacity and be actively engaged in the daily operations of a pupil transportation program.
- have attended three (3) or more annual school transportation conferences or IPTA sponsored continuing education events within the past five (5) years.
- be actively engaged in school and/or community service activities.
- be an advocate for safe and efficient pupil transportation programs and services.

Nomination requirements:

- Nominations must be co-authored by two unrelated nominators.
- Nominations must be submitted on the official forms, "Part A-Nomination Form" and "Part B-Service Description and Qualification."
- Nomination Forms must be postmarked or emailed no later than June 10th, 2025.
- Only mailed or emailed Nomination Forms (Parts A & B) will be accepted.
- Mail or Email nominations to:

Tom Horn Memorial Award lowa Pupil Transportation Association P.O Box 8 Van Meter, IA 50261

Questions? Email: 2015ipta@gmail.org

(Part A - Nomination Form)

TOM HORN MEMORIAL AWARD

Person Being Nominated - "The Nominee"

Nominee's Name:	School Dist				
Home Address: (Street)	(City)	(State)(Zip)			
Job Title: (current) Job Title: (related positions held)	Years Served (current position)				
Position:	Years Served:				
Position:	Years Served:				
Position:	Years Served:				
Persons Recommending this Nom	inee "Nominators":				
completing a Part B.					
Co-Nominator #1: Name (Print):	Signature:				
Mailing Address:					
City:	State:	Zip:			
Daytime Phone #:	E-Mail:				
Your relationship to nominee: (co-worker, s	supervisor, etc)				
Co-Nominator #1: Name (Print):	Signatu	re:			
Mailing Address:					
City:	State:	Zip:			
Daytime Phone #:	E-Mail:				
Your relationship to nominee: (co-worker, s	supervisor, etc)				

(Part "B"-Service Description & Qualification)

Supporting information for the nomination of

(Name of Nom	ninee)	(School District)					
This form may the nominee.	be duplicated and pr	ovided to additional p	ersons willing t	o provide supporting information about				
outstanding lead explain in as more examples of con	the Tom Horn Memorial Award is presented to a Transportation Director, Supervisor or Administrator that has exhibite sutstanding leadership and service to his/her school, community and to the safe transportation of children in Iowa. Pleas explain in as much detail as possible why the above nominee should be considered for this award. Include specific examples of committees served-on, projects completed, deeds performed, or actions taken by the nominee that have hat profound impact or outcome on his/her school and community, as well as the district's school transportation program.							
		may use the back of th BE ATTACHED to all s		ch this form to additional sheets before nation.)				
Signature: (Return all s	supporting documents	Relationship s from all contributors	to Nominee: in a single enve	Date: elope to IPTA by the deadline below.)				
	RETURN	PARTS A & B NO L TO: Tom Horn M Iowa Pupil Transpor	lemorial Award tation Associati	,				
	Questions: David	P.O Box 8 Van M Johnson(712) 830-32	·	2015ipta@gmail.com				
For IPTA Use:	Docitions	Mambarahini	Evn :	Conference Attendences				
Date Rec:	Position:	Membership:	Ехр.:	Conference Attendance:				