



O.A.P.T

Oklahoma Association for Pupil Transportation

School Bus Driver of the Year 2019

Driver's Name: _____

School District: _____ Years of Driving: _____

Mailing Address: _____

Name of Person Nominating _____

School District: _____

Title/Position: _____

Phone: _____

In 250 words or less please tell the Sponsors, why this person should be awarded the School Bus Driver of the Year. Please include any information that will help the Sponsors make their decision.

Complete and Return via Mail or E-mail by April 1, 2018

OAPT – P.O. Box 1626 – Guthrie, OK 73044

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