



## Access Services Spirit of Accessibility Award

### 2015 Nomination Form

Access Services is currently accepting nominations for the 2015 Spirit of Accessibility Award. If you would like to nominate an individual or organization, please fill out this form and submit it according to the instructions. The award will be presented during the Access Services Annual Meeting in 2016.

#### Purpose

The Spirit of Accessibility Award was established in 2000 to recognize the achievements of individuals and organizations involved in making accessible public transportation in Los Angeles County a reality.

#### Eligibility

Any individual or organization from one of the following categories is eligible for the Spirit of Accessibility Award for significant actions that resulted in the improvement and increased use of accessible transit service by persons with disabilities:

- > Local or municipal transit agencies
- > Local cities or other governmental entities
- > An employee or governing board member of a public transportation system
- > A representative of a consumer group or agency representing public transportation riders in Los Angeles County
- > Advocates of persons with disabilities
- > Elected officials

#### Criteria and Process

Nominees must have accomplished one or both of the following:

- > Made a significant contribution to improving the quality of public transportation for persons with disabilities
- > Demonstrated leadership and commitment to encourage, facilitate, and/or promote the use of public transportation by persons with disabilities

You may submit the completed form in one of the following ways:

- > Fax to 213.270.6055
- > Email to [avancena@accessla.org](mailto:avancena@accessla.org)
- > Mail to:  
Matthew Avancena  
Access Services  
P.O. Box 5728  
El Monte, CA 91734

#### Questions?

Contact Matthew Avancena at the above information or call 213.270.6000.

**Submission Deadline: Jan. 30, 2016**

# Access Services Spirit of Accessibility Award

## 2015 Nomination Form

This nomination is for an:  Individual  Organization

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**Name of Nominee:**

Organization:

Address:

City:

State:

Zip:

Phone:

Email:

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**Name of Nominator:**

Job Title:

Employer:

Address:

City:

State:

Zip:

Phone:

Email:

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**Please answer one or both of the following concerning the nominee. Attach additional sheets if necessary.**

1. How has the nominee contributed to improving access to public transportation for persons with disabilities in Los Angeles County?

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2. Give specific example(s) which demonstrate how the nominee has displayed leadership and commitment to encourage, facilitate, and/or promote the use of public transportation by persons with disabilities.

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