

# **SMALL BUSINESS ACHIEVEMENT AWARD**

## ***NOMINATION FORM***

### **Heart of the Valley Chamber of Commerce**

The **SMALL BUSINESS ACHIEVEMENT AWARD** recognizes a business member that is a locally owned company doing business for at least 5 years. The small business should operate at a level that inspires others and exhibits vision that goes beyond “business as usual.” The award winner will demonstrate success and exceptional performance in business practices, customer service and community involvement.

Nominations will be reviewed, and a selection made by an independent panel of judges. The winner will be recognized at our Annual Awards Event on March 3<sup>rd</sup>, 2020.

#### **NOMINATION CRITERIA:**

- Must be a business that has been in operation at least five (5) years.
- Must be a member in good standing of the Heart of the Valley Chamber of Commerce.
- Must employ less than 50 employees.
- Awards may be given in any or all the following categories:  
Retail/Hospitality, Service, Manufacturing, Technology/ Innovation

Nominations can come from a company representative, an individual or another business. Self nominations are accepted. If the nominator does not know all the information about the company, the Chamber will follow-up with the nominee. We kindly ask that if the company/person you are nominating has been recognized by the Chamber at our Annual Award Events in the past three (3) years, that you graciously open this opportunity for new recognition.

**The completed form must be submitted to the Heart of the Valley Chamber of Commerce, Selection Committee, 101 East Wisconsin Avenue, Kaukauna, WI 54130 February 3<sup>rd</sup>, 2020.**

## CONTACT INFORMATION

BUSINESS NAME: \_\_\_\_\_

PRESIDENT OR CEO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME OF NOMINATOR: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

WHY ARE YOU NOMINATING THIS BUSINESS? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## BUSINESS INFORMATION

TYPE OF BUSINESS: Hospitality/Retail \_\_\_\_\_ Service \_\_\_\_\_ Manufacturing \_\_\_\_\_

Technology/Innovation \_\_\_\_\_ Other \_\_\_\_\_

YEAR ESTABLISHED (if known): \_\_\_\_\_ AVERAGE # OF EMPLOYEES: \_\_\_\_\_

NUMBER OF LOCATIONS: \_\_\_\_\_

WHERE LOCATED: \_\_\_\_\_

MARKETS SERVED: Local \_\_\_\_\_ State \_\_\_\_\_ International \_\_\_\_\_

MAIN PRODUCTS/SERVICES: \_\_\_\_\_

Submit by February 3<sup>rd</sup>, 2020 to:

Heart of the Valley Chamber of Commerce | 101 East Wisconsin Avenue | Kaukauna, WI 54130  
or email to: [diane@heartofthevalleychamber.com](mailto:diane@heartofthevalleychamber.com)