

## MADISON AREA CHAMBER OF COMMERCE

www.madisonindiana.com

301 E. Main Street • Madison, IN 47250 • p. 812-265-3135 • f. 812-265-9784

## **Business of the Year Award Nomination Form**

**Deadline:** December 2

The Business of the Year Award recognizes the outstanding achievements made in business and industry. This prestigious award will be given to those who demonstrate leadership, vision, innovation and dedication to the Jefferson County Community.

## **Judging Criteria:**

A panel of judges will independently score each of the nominations based on their written application.

## **Qualifications:**

- ✓ Business must be a member of the Madison Area Chamber of Commerce in good standing
- ✓ Has been in business at least 3 years
- ✓ Has increased the business image of the community as viewed on the local, state, or national level
- ✓ Has earned a high level of respect within the business community
- ✓ Gives generously of themselves and /or staff in time and resources to the community
- ✓ Evidence of success in sales, profits, and/or employment growth
- ✓ Successful response to adversity
- ✓ Previous award recipients are not eligible for nomination

Please provide the following information:

| Name of Business Nominated:         |  |
|-------------------------------------|--|
| Contact / Title:                    |  |
| Business Address:                   |  |
| Phone Number:                       |  |
|                                     |  |
| Name of Sponsor:                    |  |
| Home Address:                       |  |
| Email & Phone Number:               |  |
| Relationship to nominated business: |  |

| How has this business given back to the community? Please list programs, activities, or service involvement.    |
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| What makes this business stand out as a business leader in Jefferson County?                                    |
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| What has the business done to create a culture that is supportive of its employees and their quality of life?   |
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| Please list evidence of success in sales, profits, or employment, including challenges the business has met.    |
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| Additional information you would like the selection committee to consider (use additional sheets if necessary): |
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| The above information in a second to the best of made as a life in  |
| The above information is accurate to the best of my knowledge.  |
|   |
| Name Date   |

Please complete and return this form to the Madison Area Chamber of Commerce at 301 E. Main Street, Madison, Indiana 47250, fax to (812) 274-0203, or email info@madisonindiana.com on or before December 2.