



2020 Minority Business Award Nomination Application

NOMINATION PROCEDURES AND RULES

- Complete the nomination form. You may choose to attach as the cover page to accompany letters of explanation and/or recommendation or supporting documents.
- All nominations must be submitted in a sealed envelope marked with the award name (example – Minority Business Award Nomination).
- All nominations must be postmarked or delivered to a Chamber employee at the Chamber office by the deadline date and time.
- All nominations will be kept confidential.
- The contact person listed on the nomination form will be notified if their nominee is chosen by the selection committee.

Please keep in mind the following judging criteria when filling out the application:

- Business growth and performance
- Sound business strategies and practices
- Customer service strategies and practices
- Business challenges
- Unique and innovative approaches
- Community involvement and contribution
- Employee relations

**RETURN THE COMPLETED NOMINATION FORM BY 5:00 P.M. ON AUGUST 13, 2020,
IN A SEALED ENVELOPE BY CERTIFIED MAIL WITH SIGNATURES REQUIRED OR
HAND DELIVER TO:**

**ATTENTION: Minority Business of the Year
Kinston-Lenoir County Chamber of Commerce
301 N. Queen Street
PO Box 157
Kinston, NC 28502-0157**

NOMINEE:

Business Name: _____ Type of Business: _____

Owner/Principal and Title: _____

Address: _____

Work Phone: _____

Email Address: _____

Business Website: _____

Number of full-time employees when the business began: _____

Current number of employees: _____

Number of years the business has been operating in Lenoir County: _____

Please complete the following information. Use additional paper if needed.

Describe business including but not limited to its history, its products and/or services offered. Consider including what makes this business stand out.

Demonstration of good employee relations practices/training and empowerment.

What are the unique successful characteristics of the business?

Community involvement? (any contributions made by the business through use of he/her personal resources, time, efforts, etc. Any awards and recognitions the business may have received)

Additional information of significant interest about the nominee and his/her business? (example: obstacles overcome, contributions in other areas, etc.)

NOMINATOR:

Name: _____ Company Name: _____
Business Phone: _____ Alternate Phone: _____
Email Address: _____

I _____, (print name) acknowledge the information provided in this application is true and factual to the best of my knowledge.

Information provided will be kept confidential. Only selected Chamber Staff and the specially selected Judges will view the information. Chamber Staff reserves the right to verify any information provided in this application.