



***12th Annual
Employment Awards Luncheon
Nomination Criteria***

~

***Save-The-Date
Thursday, November 14, 2019
11:30 a.m. – 1:30 p.m.***

- ❖ ***Employee of the Year*** – *An individual with a disability who has achieved significant work/career outcomes.*

- ❖ ***Employer of the Year*** – *An employer that has demonstrated a significant commitment to hiring, retaining and advancing individuals with disabilities.*

- ❖ ***Workforce Professional of the Year*** – *An individual workforce professional who has made significant contributions in the employment of people with disabilities.*

- ❖ ***Business Owner of the Year*** – *An individual with a disability who owns and has led their business to achieve success.*

- ❖ ***Provider of the Year*** – *A non-profit community service provider that has achieved significant outcomes in employment of people with disabilities.*

- ❖ ***Transition Professional of the Year*** – *A school affiliated professional that has demonstrated an exceptional commitment to helping students with disabilities transition from high school to meaningful employment.*



Maryland Works, Inc.

12th Annual Employment Awards Luncheon Nominations

To nominate a deserving individual, employer, workforce development professional, business owner or provider, please complete the form below. Nomination forms must be received by Monday, September 30th. Please mail the Awards Nomination form to Maryland Works, 10270 Old Columbia Road, Columbia, MD 21046 or e-mail Awards@mdworks.com to or send by fax to 410-381-1558.

(1) Information about the person making the nomination

Nominator Name/Title:

Day Phone:

Fax:

E-mail:

Address _____

Address

City

State

Zip Code

(2) Information about the nominee

This nomination is for:

- Employee of the Year** **Employer of the Year** **Workforce Professional of the Year**
 Provider of the Year **Transition Professional of the Year** **Business Owner of the Year**

TELL US ABOUT THE NOMINEE

Nominee:

Day Phone:

Fax:

E-mail:

Address: _____

Address

City

State

Zip Code

A. Tell us a little about the nominee *(Please attach any relevant materials to support the nomination)*

B. Please make the case for why this nominee deserves the award. *(Please attach any relevant materials to support the nomination)*