



**2016 Outstanding Community Organization Award  
Nomination Form**



*Please nominate the organization or individual based on the following criteria:*

*The "Outstanding Community Organization Award" was developed to honor local organizations who are making significant contributions to our community through their time, actions, talents and dedication. The organization selected should serve as a role model for striving to make our community a better place to live and work.*

*The nominee must be a member of the Grafton Area Chamber of commerce*

**The presentation of the award/awards will be at the Annual Chamber Meeting  
Wednesday, May 18<sup>th</sup>, 2016**

NAME OF ORGANIZATION or INDIVIDUAL NOMINATED \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

NOMINATED BY: \_\_\_\_\_ PHONE# \_\_\_\_\_

Please comments on how this Business or Individual meets the above criteria: *(Attach additional sheets if necessary)*

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**Please send this nomination form to the chamber office no later than April 22<sup>nd</sup> 2016**

If you have any questions, Please contact the office at 262-377-1650



**2016 OUTSTANDING BUSINESS/BUSINESSPERSON AWARD  
Nomination Form**



*Please nominate the business or individual business person based on the following criteria:*

- 1. The business or individual businessperson must be a member of the Grafton Area Chamber of Commerce.**
- 2. Growth in employment due to business or management of business.**
- 3. Recognition: An increase in the business image in the local community as viewed on the local, state or national level.**
- 4. Reputation: Respect within the business community and a well-rounded business or individual businessperson with respect to financial performance, business responsibility, service to the community, and political awareness.**
- 5. Leadership: Improved the business climate with positive influence.**

**The presentation of the award/awards will be at the Annual Chamber Meeting  
Wednesday, May 18<sup>th</sup>, 2016**

NAME OF BUSINESS or INDIVIDUAL NOMINATED \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

NOMINATED BY: \_\_\_\_\_ PHONE# \_\_\_\_\_

Please comments on how this Business or Individual meets the above criteria: *(Attach additional sheets if necessary)*

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**Please send this nomination form to the chamber office no later than April 22<sup>nd</sup> 2016**

If you have any questions, Please contact the office at 377-1650