



ALBANY AREA CHAMBER OF COMMERCE
Small Business of the Year Nomination Form
(Nomination due March 24, 2017)

Award-eligible businesses must be

- *Member of Albany Area Chamber of Commerce*
- *Member of Albany Area Chamber for minimum of 1 year*
- *Have fewer than 100 full-time employees*

Business Name: _____

Type of Business: _____

Owner/President/CEO/Manager (on site): _____ Title: _____

E-mail Address: _____

Contact person (if different from above): _____ Title: _____

E-mail Address: _____

Business Address: _____

Phone: _____ Web Address: _____

This is a nomination form. The Awards Selection Committee will notify your nominee and request their submission according to the award guidelines.

Considerations for the Awards Selection Committee (does *not* have to be provided at time of nomination)

- Continued growth during in the areas of sales, customer service and/or new products/services
- Innovativeness of products/services offered
- Resiliency when dealing with challenges and opportunities, and the methods used to address them
- Contributions/involvement by nominee that support the community
- Involvement by nominee with the Albany Area Chamber of Commerce

Nominated by: _____ Date: _____

Organization: _____

Address: _____

Telephone: _____ E-mail: _____

Please return by **March 24, 2017**, to mbickerstaff@albanyga.com

Click on the email address to send form back electronically.