



Excellence in Disability Employment Awards
presented by
Bergen County
Workforce Development Board

2018 NOMINATION FORM

In observation of October's National Disability Employment Awareness Month (NDEAM), the Bergen County Workforce Development Board's (WDBs) Disabilities Committee would like to applaud Bergen County employers that are diversifying their workforce by providing competitive integrated employment (CIE) opportunities for individuals with disabilities.

Employees, employers, service recipients, service providers, family members, and the general public are encouraged to submit nominations for the Annual Excellence In Disability Employment Awards.

The awards will be presented at the "Salute to Champions Breakfast", hosted by the Bergen County Division on Disability Services, at Bergen Community College in Paramus, on October 26, 2018.

HOW TO NOMINATE A CANDIDATE

Nominate one or multiple employers by completing a form for each. Complete the online nomination form or submit the hard copy form to the Bergen County Workforce Development Board no later than **Friday, September 21, 2018**. Nomination forms are available on the Bergen WDB homepage at bergenworkforce.org and can be submitted:

- Online at bergenworkforce.org
- By email to Carol Polack at carpol@bergen.org
- By fax to (201) 996-6975
- By mail to Bergen County Workforce Development Board, 60 State St., Rm 200, Hackensack, NJ 07601

CRITERIA

Consistently shows commitment to employing people with disabilities and fully including them in the fabric of the workplace.

ELIGIBILITY

Must employ youth or adults with disabilities, at a competitive wage, in an inclusive environment, in Bergen County New Jersey, and demonstrate openness to promoting natural and supports and reasonable accommodations.

TIMELINE

July 16, 2018 – Nominations Open
September 21, 2018 – Nominations Close
September 28, 2018 – Official Announcement of Award Recipients
October 26, 2018 – Award Recipients Are Recognized At the Salute to Champions Breakfast

*** PLEASE SEE REVERSE SIDE FOR NOMINATION FORM***



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NOMINEE (Information about the employer you are nominating)

Employer Name: _____

Employer Address: _____

Contact Person for Employer: _____

Email Address for Employer: _____

Phone Number for Employer: _____

NOMINATOR (Information about you)

Your Name: _____

Your Address: _____

Relationship to Employer: _____

Your Email Address: _____

Your Phone Number: _____

Nomination Justification

Please describe why you are nominating this employer by addressing how the nominee meets both the eligibility and criteria for the award as outlined:

Submit completed form(s) to the Bergen WDB by Friday, September 21, 2018.
You may complete this form online at bergenworkforce.org, fax to (201) 996-6975, email to Carol Polack at carpol@bergen.org, or mail to 60 State St., Rm. 200, Hackensack, NJ 07601.