# Athena Young Professional Award® Nomination Form Page 1

Nominators, including self-nominators, should address each of the following criteria in detail for their Athena Young Professional Award® nominee:

#### I. PROFESSIONAL LEADERSHIP

Provide specific examples and detailed descriptions of how the nominee has demonstrated:

Excellence, creativity and initiative in her business or profession as evidenced by leadership roles, personal accountability, and results Impact on revenue or financial condition of the firm/company/agency Impact on employee or client satisfaction Impact on quality of product or services

Participation in and impact on strategic positioning of the company/firm/agency

#### II. COMMUNITY LEADERSHIP:

Provide a list of local, state, national, and international participation in community organizations and include list of service and offices held as evidenced by:

- Leadership or support role to an organization outside of her normal or expected professional responsibilities
- A showing of advancement or improvement of the organization based upon her participation
- A showing of any direct contributions made to programs, policies, or initiatives that positively influence the status of the organization or community issue/initiative

### III. PERSONAL LEADERSHIP

Provide specific examples and detailed descriptions of how the nominee has assisted and mentored young women personally and professionally as evidenced by:

- · Mentorship or coaching provided by nominee
- Influencing or encouraging the career development or advancement of young women
- Volunteer efforts with organization's whose mission is or is related to the growth, mentorship, or advancement of young women

IMPORTANT! Each nominee must live or work in Vermont

## **RETURN COMPLETED FORM BY AUGUST 15, 2019 TO:**

Central Vermont Chamber of Commerce 33 Stewart Road P O Box 336 Barre, VT 05641 Athena@centralvtcom

# Deadline for submission is August 15, 2019.

Today's Date:			
Nominee Name:			
Title or Position:			
0			
Company	y:		
Rusiness	s Address		
Business Address:			
City: State: ZIP Code:			
Business	Phone:	Home Phone:	Email:
Nominator (Printed Name of Nominator):			
Signature of Nominator:			
Company Name			
Company Name:			
Details for Commisting the Forms			
Only official form accepted (link to printable version or e-form			
One additional page acceptable such as resume acceptable  No other supporting documents such as scrapbook, brochure, photo gallery, or			
	social media links (LinkedIn, Instagram, etc) acceptable		
Checklist (did you include)			
	Nominee details and contacts $\square$ Quantitative information and documentation of the nominee meeting the award $\square$		
	criteria		
Did you verify the availability of the Nominee to attend the Gala $\ \Box$			