



WI-CARH

Wisconsin Council for
Affordable & Rural Housing

Post Office Box 258098, Madison, WI 53725 • 608-437-2300 • info@wicarh.org

2019 WI-CARH AWARD NOMINATION FORM (Universal Application Form for All Awards)

Name of Person/Property Being Nominated for an Award: _____

Name of Management Company (if applicable): _____

Property Name: _____

Property Address: _____

SELECT ONE AWARD CATEGORY:

Site Manager of the Year

Limited Profit Non-Profit

Number of units managed: _____ Length of Employment: _____

Town Population: _____

Choose all of the financing that applies: LIHTC RD HOME HUD

Other: _____

Choose one of the following: Elderly Family Rental Assistance: _____ # of Units

****A minimum of one tenant testimonial is required. Please attach.**

Maintenance Person of the Year

Limited Profit Non-Profit

Number of units responsible for: _____ Length of Employment: _____

Average Number of Service Requests per Day: _____

Average Response Time to Service Requests: _____

Choose one of the following: Elderly Family

Choose all of the following duties/certifications that apply:

HVAC Plumbing Painting Grounds keeping/Mowing Other: _____

****A minimum of one tenant testimonial is required. Please attach.**

Property of the Year

Limited Profit Non-Profit

Number of Units: _____ Age of Property: _____

Choose one of the following: Elderly Family

Choose all of the financing that applies: LIHTC RD HOME HUD

Other: _____

**A minimum of two pictures of the property are required (digital or hard copy is acceptable). Please note that these pictures may be used by WI-CARH in announcing the award.*

AWARD NARRATIVE: (*Use a separate sheet if necessary)

- **Site Manager of the Year & Maintenance Person of the Year Awards:** Please describe why this person deserves the award.
 - Provide **specific examples** of attributes that they share with others who have achieved excellence in their field (e.g., attributes relating to their attitude, character, commitment, passion, training, compliance, personality, community involvement, decision making, work ethic, accuracy, etc.).
 - Include any achievement awards earned and any times this person went above and beyond the call of duty.
- **Property of the Year Award:** Describe why this property deserves the award.
 - Explain any **unique features/programs for residents** (e.g., green sustainable, services provided for families or older adults, innovative approaches to financing, etc.).

PERSON SUBMITTING THIS NOMINATION:

Name: _____

Company: _____

Address: _____

Telephone: _____ Email: _____

NOTE: to be eligible for consideration, this form must be received no later than **October 4, 2019.**

Send to: **WI-CARH Post Office Box 258098, Madison, WI 53725 or email to info@wicarh.org**