

2024 Nomination Form

INDIVIDUAL CATEGORY

Submit completed form to:
Guam Chamber of Commerce
East West Business Center
Suite D301, 3rd Floor
718 N. Marine Corps,
Upper Tumon, Guam 96913
Tel: 472-6311/8001

2024 GUAM BUSINESS HALL OF FAME

NOMINATION FORM [Individual Category]

Nominee's Full Name:						
Occupation / Title of Position:						
Name of Business:						
Business Address:						
Home Address:						
Telephone: (Business)	(Home)	_Fax :			
Nomination Submitted By:						
Title:						
Name of Business or Organiz	ation:					
Address:						
Telephone:						
 Instructions to Nominator: Please answer the following questions and affix your signature below. Your response to the following is important in determining the nominee's eligibility for the Laureate award. 1. Did/Does the nominee reside or work in Guam? [] Yes [] No (Please provide documentary evidence that the nominee fulfills this criteria.) 						
2. In your opinion, did/does moral character?	the nominee possess p [] Yes [vas/is he/she of high			
Signature		Date				

Give a one paragraph description of the nominee's business or profession/occupation.

A concise statement (100 words or less) clearly describing why the nominated individual deserve recognition as a Laureate to the Guam Business Hall of Fame:
SELECTION CRITERIA FOR BUSINESS HALL OF FAME LAUREATE
NOTE: Please relate specifically how the nominee fulfills the selection criteria below.
I. RECOGNITION FOR PERSONALLY HAVING MADE SIGNIFICANT CONTRIBUTIONS TO THE SUCCESS OF THE COMPANY OR PROFESSION.

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II.	PERSONAL INVOLVEMENT IN THE DEVELOPMENT OF A COMPANY OR STRUCTURE THAT ENHANCED PRODUCTIVITY, QUALITY AND PROFITS.
III.	SERVES/ED AS A ROLE MODEL.
IV.	DEMONSTRATION OF CIVIC AS WELL AS CORPORATE LEADERSHIP.

ADDITIONAL INFORMATION TO SUPPORT SELECTION CRITERIA

MAJOR ACCOMPLISHMENT(S) RELATIVE TO BUSINESS OR INDUSTRY ON GUAM

(List in chronological order and explain each entry)

Year(s)

Accomplishment(s)

HO	NO	RS	/AWA	RDS	RECEIV	/ED
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<u>Year(s)</u>	Honor/Award
OTHER RELEVANT INFORMATIO	<u>N</u>
	r this heading a biographical sketch of your candidate. Include: citizenship, place of residence, date of death if deceased, , etc.
published by or about your candidate or ar	o the selection process to submit copies of any articles ny other documentary evidence to support the nomination. ns or agencies who may be knowledgeable about your
candidate's career.	
RELEASE STATEMENT OF NOMINEE DECEASED NOMINEES:	OR DESIGNATED REPRESENTATIVE IN THE CASE OF
I,	, am aware that I or
nomination form and all support docum	, am aware that I oras a candidate for admission ne. I understand that the information provided in this nentation about me or
will be u	sed by the Guam Chamber of Commerce.
I consent to the use of such informa	tion for the production of a videotape and for publicity

Signed:______Date: _____