2018 BOOM Awards

Employee of the Year

Name of person submitting nomination_____

Mailing Address_____

City_____State_____Zip_____Email_____

Telephone (home)_____(work)_____

Nominee

(A separate nomination form must accompany each entry.)

Name of person or organization nominated_____

Title of nominee_____

Work address of nominee_____

Telephone (home)_____ (work)_____

Email_____

Please attach a separate page to answer each question, with a separate statement for each.

1. How does the nominee qualify for BOOM recognition?

2. Describe the nominee's accomplishments and explain why they are worthy of recognition.

3. How long has the nominee worked for her/his current employer?

4. Briefly describe any other considerations that demonstrate the nominee's outstanding qualities as an employee.

If the person is selected, will the nominee or a representative accept the award in person?

_____yes _____no

This form should be completed and submitted with two letters of support.