

# KOSBE AWARDS: 25th ANNIVERSARY

SMALL BUSINESS NOMINATION FORM

EMAIL COMPLETED FORM TO [AWARDS@KOSBE.ORG](mailto:AWARDS@KOSBE.ORG)



## SELECT ALL THAT APPLY

Locally-Owned and Operated Franchise  New Business  Young Entrepreneur  Woman-Owned  Veteran-Owned  
 Food  Service  Manufacturing  Retail  Construction

## PLEASE FILL OUT ALL OF THE REQUIRED INFORMATION

Name  Business  Description   
Address  City  Zip Code   
Phone  Email  Website   
Start Date  # of Employees Including Owner  Does business meet ALL entry criteria? Y  N

## TELL US A LITTLE ABOUT THE BUSINESS

List community involvement/service. i.e., charities, volunteers, activism, projects, etc.

List business accomplishments or highlight your success story

List marketing activities. i.e., website, advertising, tradeshow, networking, presentation, social media, etc.

Tell us about best practices. How does business maintain performance excellence? i.e., process, systems, procedures, etc.

Tell us about future plans for growth and/or goals

Nominated by  Email  Phone