SAM CARSON AWARD FOR EXCELLENCE IN THE PROMOTION OF WORKFORCE DEVELOPMENT



NOMINATION PROCEDURES AND FORMS

Rivers East Workforce Development Board 1502 N. Market St, Suite A Washington, North Carolina 27889 Dear Workforce Development Community in Rivers East: (Beaufort, Bertie, Hertford, Martin, and Pitt Counties)

Attached are the nomination forms and procedures for the *Sam Carson Award for Excellence in the Promotion of Workforce Development*. Also included is a checklist to ensure that all the required information has been submitted.

The Sam Carson Award was created by the Rivers East Workforce Development Board in December 2007 to recognize the outstanding efforts of the NCWorks Career Center, Workforce Innovation & Opportunity Act program operator, or NCWorks Center partner in the counties of Beaufort, Bertie, Hertford, Martin, and Pitt which has demonstrated outstanding efforts in the marketing and promotion of the Workforce Development system.

The nominations must be in compliance with the following specifications:

- 1) All nominations must be received by the Rivers East Workforce Development Board office by 5:00 p.m. on Friday, April 3, 2020.
- 2) Late, faxed or e-mailed nominations will not be accepted.
- 3) Nominators may submit only one nomination.
- 4) Mail all nominations to:

River East Workforce Development Board Attn: Jennie Bowen 1502 N. Market St, Suite A Washington, NC 27889

Questions or comments may be directed to Jennie Bowen at jbowen@mideastcom.org or (252)974-1815.

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NOMINATION PROCEDURES

NOMINATION SPECIFICATIONS:

Nominations not in compliance with all specifications will not be considered:

- A. Eligible nominees include NCWorks Centers, Workforce Innovation & Opportunity Act program operators and NCWorks Center partners in the counties of Beaufort, Bertie, Hertford, Martin, and Pitt.
- B. Nominations must not exceed two and one-half single-spaced typed pages in addition to the nomination form, support letter(s) and checklist.
- C. The original and one copy of the nomination package must be received by the Rivers East Workforce Development Board office, Attn: Jennie Bowen, no later than 5:00 p.m. on Friday, April 3, 2020. Faxed or e-mailed nominations will not be accepted.

DIRECTIONS FOR COMPLETING THE NOMINATION PACKAGE:

<u>Sections I and II. Nominee/Nominator Information.</u> Provide the appropriate identification information on the attached nomination form. The Chief Executive Officer of the nominating organization must sign this form.

<u>Section III.</u> Organizational Information. Provide a brief (no more than one-half single-spaced typed page) description of the nominated organization.

<u>Section IV. Nominee Accomplishments.</u> Provide a brief (no more than two single-spaced typed pages) summary describing the accomplishments of the nominated organization. <u>Each of the following criteria must be addressed in separate paragraphs:</u>

- A. Describe significant promotional contributions made to the workforce development system beyond the normal professional duties and responsibilities of providing services.
- B. Discuss how the organization has impacted or contributed to the promotion of workforce development within the local NCWorks Career Center system or other workforce development programs.
- C. Describe innovation and creativity in the promotion of workforce development services in Rivers East.

<u>Checklist.</u> Complete the checklist to ensure the nomination package is complete. The checklist must be signed by the contact person or CEO of nominating agency.

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NOMINATION FORM

| I. | NOMINEE INFORMATION: | | |
|-----|---|---------------------------|--|
| Or | ganization Nominated: | | |
| Ma | ailing Address: | | |
| | | | |
| Tel | | | |
| II. | NOMINATION SUBMITTED BY: | | |
| 11. | NOMINATION SUBMITTED BY. | | |
| Or | ganization Name: | | |
| Co | ntact Person/Job Title: | | |
| Ma | niling Address: | | |
| Tel | lephone Number: | FAX: | |
| E-1 | mail address: | | |
| Ch | nief Executive Officer of the Nominating Or | anization: | |
| | Name / / Title | Signature | |
| III | . ORGANIZATIONAL INFORMATIO | N (Attach separate page.) | |
| IV. | NOMINEE ACCOMPLISHMENTS | Attach separate page/s.) | |

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CHECKLIST

| \Box The original and one copy of nomination packet bound by a clip (no binders, folders). | |
|--|------|
| \square Signature of nominating agency's Chief Executive Officer on nomination form. | |
| ☐ Section I/II – Nominee/Nominator Information completed. | |
| ☐ Section III – Synopsis of Nominated Organization completed on one-half single-space | ced |
| typed page. | |
| ☐ Section IV – Nominee Accomplishments completed on two single-spaced typed page with each criteria (A-C) discussed in <u>separate</u> paragraphs. | es |
| ☐ Received prior to deadline of 5:00 PM on Friday, April 3, 2020. | |
| Please fill out this checklist, sign it and return with your nomination packet to the Riesast Workforce Development Board Office. | vers |
| Contact person or CEO of nominating agency: | |
| Signature: Date: | |