

Criteria for Business/Associate of the Quarter Awards:

- The Business **MUST** be a current member in good standing with the Alamogordo Chamber of Commerce. The Associate nominees business **MUST** be a Chamber member in good standing.
- **GROWTH:** Along with improving his/her own business, the Business/Associate helps others in business and community “growing” initiatives (works with officials in the city and county, citizens and local churches, etc).
- **LEADERSHIP:** Business/Associate displays leadership in his/her business community by setting a good example with his/her business practices, maintaining a high regard for ethical business practices, and helping to address needs of the community.
- **JOBS:** Business/Associate may help to provide jobs for locals in the community, and reaches out to get industry and other businesses to locate in the community.
- **GOOD & SERVICES:** Business/Associate provides high-quality products of good values.
- **CUSTOMER SERVICE:** Business/Associate provides superior customer service.
- **IMPROVEMENT/RENOVATION:** Business shows efforts for renovation/improvement (remodeling, restoration, and/or improving the aesthetics of his/her business and the community) and helping to reserve the historical aspects of Alamogordo, where possible.
- **COMMUNITY INVOLVEMENT:** Business/Associate hosts or contributes to an Alamogordo event (i.e., FAN Club, Business After Hours, Seminars, Cottonwood Festival, Frontier Village-Otero County Fair).

Business Nominations MUST include a short description of:

- Responsibilities _____

- Overcame challenges including financial, employee or expansion issues

- List organization affiliation or involvement with local community _____

Associate Nominations MUST include a short description of:

- This Associate is being recommended because they performed above and beyond daily responsibilities by: _____

Only full and complete nominations received will be evaluated and posted on-line for chamber members to select based on the written nominations. Incomplete nominations will NOT be considered.

BUSINESS NOMINATION:

Name: _____
Address: _____
Phone: _____ Website: _____

ASSOCIATE NOMINATION:

Name: _____
Business Affiliation: _____
Address: _____
Phone: _____ Website: _____

Nominator’s Name: _____

Please return your Nomination Form to the Alamogordo Chamber of Commerce.

NOTE: If sending through the mail, please use tape to seal form and affix first class postage.

Thank you for your participation!
If you have any questions, please call the Chamber at (575) 437-6120.

OFFICE USE ONLY	
Verified Associate Chamber Member:	Y / N
In Good Standing:	Y / N
Verifying Initials:	_____
Date Verified:	_____

Affix
Postage
Here

Business / Associate of the Quarter **NOMINATION FORM**



**"Encourage to Excel,
Prepare to Succeed."**

Chamber of Commerce
1301 N White Sands Blvd
Alamogordo, NM 88310

**ALAMOGORDO CHAMBER OF COMMERCE
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