

Please complete this form by typing in the fields.
Save the file to your local hard-drive and then
email a copy to northwest@isbdc.org.

If you are unsure about nominating a candidate
or have any questions, contact us at
(219) 644-3513 or northwest@isbdc.org.
Thank you.

edayleaders.com

Entrepreneurial
Excellence Awards



Cover Sheet

AWARD: Minority Owned Business

NOMINEE INFORMATION

FULL NAME _____

TITLE _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

PHONE _____ FAX _____

EMAIL _____

DESCRIBE NOMINEE'S BUSINESS _____

HAS NOMINEE RECEIVED SBA ASSISTANCE

If yes, describe type of assistance and the year(s) provided.

NOMINATOR INFORMATION

FULL NAME _____

TITLE _____

BUSINESS _____

ADDRESS _____

PHONE _____ FAX _____

EMAIL _____

BIOGRAPHY: Brief biography of the Minority Owned Business nominee.

BUSINESS PROFILE: Profile your business, when and how it was started, what the company sells, what markets you serve, how you have succeeded.

Provide evidence of success as measured by sales and profits, including current and past financial position.

Increased employment opportunities/growth in employees – Provide how many employees you have now and how you have grown over time.

Demonstrated potential necessary for long-term business success and economic growth – How does your company expect to succeed and grow in the future?

Innovation and response to adversity – Describe ways your company has been innovative. How has your company faced adversity?

Demonstrated encouragement and/or advocacy of minority small businesses – Described how you have supported or advocated for other minority businesses.

FINANCIAL SUMMARY			
Year	2014	2015	2016
Number of Employees			
Total Sales			
Net Profit (Before Tax)			
Total Assets			
Total Liabilities			
Net Worth			