



## **Application for Employer of the Year Award**

This application along with any supporting material, should be scanned and sent via e-mail to the Chair Nominations & Elections [Jack\\_Careello@cpkcr.com](mailto:Jack_Careello@cpkcr.com) by March 31, 2025 to be eligible this award. Please ensure you receive an acknowledgement e-mail receipt within 48 hours of submitting your application.

**(Winners within the previous three years are not eligible for nomination.)**

Nominated Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer Representative/Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

1. Number of employees: \_\_\_\_\_

2. Number of active Chapter members: \_\_\_\_\_

3. Does nominated employer fund full or partial payments for employee's membership dues?

\_\_\_\_\_

4. Does nominated employer fund full or partial payments for their employees course registration fees?

\_\_\_\_\_

How many courses has employer provided funding for this past year? \_\_\_\_\_

5. Does nominated employer provide funding to attend IRWA International Education Seminar, Region Forums and or Chapter 29 events?

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6. Is there a salary incentive for an employee who receives their SR/WA or IRWA Certification?

Please explain:

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7. Does employer promote IRWA participation at Chapter, Region and or at International levels?

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8. When employer contracts for outside services, do they strongly encourage the hiring of IRWA members? Please provide details or example.

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9. Does employer have any active member(s) serving on the Chapter, Region or on an International level?

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10. In 250 words or less provide some key points or highlights summarizing why nominated company should receive this year's Chapter Employer of the year:

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Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_