

# Be A Hero in Service Award Nomination Form

A **Hero in Service** is admired for their courage, outstanding achievements, or notable qualities. They have had a positive impact in Brevard County, look out for others, and go beyond what is expected in either their personal or professional life (or both!). BAHS wants to reward these Heroes in Service and recognize their contribution to our community. BAHS Member businesses may nominate their own employees, or other BAHS Member business employees, for this recognition. All nominations will be submitted to a volunteer panel of community leaders for voting and the top 5 nominees chosen by the volunteer panel will receive a \$100 award at the BAHS Annual Holiday Party in December.

**Guidelines:**

- ✚ All nominations must be from BAHS Member Businesses
- ✚ All nominations must be **written legibly** in the area provided on the reverse side of this form OR typed and attached to the front side of this form
- ✚ All nominees must work for BAHS Member Businesses
- ✚ All nominations must be received by **October 16<sup>th</sup>**.
- ✚ All nominations must be received via email: [DZizzo01@att.net](mailto:DZizzo01@att.net) or submitted at the Registration Table of the September or October BAHS meetings.
  
- ✚ If your nominee is chosen, you will be notified by November 13<sup>th</sup>.
- ✚ If your nominee is chosen, you are responsible to be sure they are present to receive their award at the BAHS Annual Holiday Party.

As a first-ever giveback to front line employees, BAHS is looking to provide additional benefit and positive experiences to member businesses. We look forward to honoring the stories of those in the community who are truly **Heroes in Service!**

All nominated Hero stories will be submitted anonymously to the Volunteer Panel. Please provide all information below:

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

Nominee's Name: \_\_\_\_\_

Nominee works for what company: \_\_\_\_\_

Nominating Individual: \_\_\_\_\_

Nominating Individual's Company: \_\_\_\_\_

Nominating Individual's email: \_\_\_\_\_

Nominating Individual's Phone #: \_\_\_\_\_

