Equity and Human Relations Award Nomination Form



Award Nomination Information

Thank you for nominating an individual, business, or organization for the annual EHRAC Award.

With your nomination, we celebrate the work that is being done to build an inclusive and equitable Culver City.

Feel free to add any attachments that will help the EHRAC fully understand this individual's organization's or business's contributions to our community.

Award Criteria and Rules:

- Works with an underserved population
- · Motivates others to serve
- · Directly involved with those served
- Serves a broad population
- Assists in meeting the needs of others
- Service is based on urgency/need
- The nominee is an "unsung hero"
- For the individual award, the nominee must reside, or be employed in Culver City.
- For the student award, the nominee must reside in Culver City or attend a Culver City district school.
- For the business, the business must be located in Culver City.
- For the non-profit organization award, the organization must serve the Culver City area.
- Self-nomination is not allowed.
- Equity and Human Relations Advisory committee members and their families are not eligible.

Award Categories:

- Individual
- Student
- Business/Corporation
- Non-Profit Organization

The deadline for submitting nomination forms is September 30.

Nominee Information



Name of Individual/Student/Non-Profit Organization/Business Required

Complete this field if you selected 'Business/Corporation' in Nominee Information: Award Category

Name of Business Owner or Manager

Complete this field if you:

• selected 'Non-Profit Organization' in Nominee Information: Award Category

Or if you:

• selected 'Business/Corporation' in Nominee Information: Award Category

Business or Non-Profit Organization Website

Complete this field if you selected 'Non-Profit Organization' in Nominee Information: Award Category

Name of Organization's President/Director/Representative

Complete this field if you selected 'Non-Profit Organization' in Nominee Information: Award Category

Purpose of Non-Profit Organization Required



Street Address Required
State Required
Zip Code Required
Phone Required
xxx-xxx
XXX-XXX-XXXX
Email
Complete this field if you selected 'Individual' in Nominee Information: Award Category
Current Occupation

In the space below, please describe the ways your nominee is working towards creating a culture of equity and inclusivity in our community. Add specific examples regarding the scope and impact of their work, along with any other relevant information.

About your Nominee	

Upload files. You can upload files containing the information instead of filling out the field above or to supply additional information in support of your nominee.

Please attach all files to the end of this form before submitting it.

Nominator Information

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We require your contact information so that we can have the opportunity to contact you regarding your nominee.

Your Name Required
Street Address Required
City Required
State Required

Zip Code Required
Phone Required
xxx-xxxx xxx-xxxx
Email Required
Relationship to Nominee Required

End of form
Don't forget to attach all files before submitting this form